

TOWARD A THEORETICAL AND THEOLOGICAL FRAMEWORK
FOR THE USE OF
THERAPEUTIC NON-VERBAL COMMUNICATION EXPERIENCES
IN GROUP PASTORAL COUNSELING

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This dissertation, written by

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CHAPTER I

INTRODUCTION

Statement of Problem

Dr. Frederick Wertham, the author of several books, writes of his experience as a surgical patient.¹ In re-living the anxiety he experienced going into, and recovering from, his surgery, Dr. Wertham speaks of two factors which gave him support: first, the sounds of voices from the staff of doctors and nurses that he knew; second, the physical touch of both the nurses and doctors.

In both cases, comfort and support came for Dr. Wertham in the form of non-verbal communication. It was not the verbal content of the voices which were a comfort, but the "sounds." It was the physical touch of being handled and positioned and, perhaps, just held.

The author has also experienced the importance of the touch when visiting hospital patients. After the visit, if the patient desires a time of prayer, the holding of hands or the placing of a hand on the shoulder or head creates a physical bond which adds a deeper dimension to the relationship.

¹M. Pinner and B. F. Miller (eds.), When Doctors are Patients (New York: Norton, 1952), pp. 108-109.

The importance of physical contact in calling in convalescent hospitals is crystal clear. One elderly woman the author visits regularly has stated that the most important part of the visit for her is the ability to hold the author's hand and to be held in turn.

The Biblical witness to the importance of the physical touch is impressive. The synoptic gospels report the great number of times Jesus touched those he healed and the belief in the healing power of the touch. Paul, in his injunctions to the new churches, speaks of the laying on of hands in both a physically healing sense and in the sense of God's spirit being passed on through the hands (2 Timothy 1:6). Both Paul and the writer of I Peter speak of greeting each other with a "holy kiss," certainly a form of physical communication (Romans 16:16 and I Peter 5:14).

The author, as a member of the Youth Faculty in the Southern California-Arizona Annual Conference of the United Methodist Church, has led a number of training sessions for workers with youth and youth to discover the meaning of youth ministry. Part of the course are several "sensitivity training" experiences which make use of touch and other non-verbal communication between the participants. The author's experience with sensitivity training shows that these techniques build bridges between people, provide opportunities for the exploration of feeling and behavior, and provide much information about individuals

for others to perceive. The translation of feelings into a non-verbal language has led participants to new awareness of each other and themselves.

The author has also been exposed to the work of Fritz Perls and others at Esalen who use Gestalt Therapy.² This approach to therapy stresses the fact that man is not a bunch of unrelated pieces, but rather a gestalt, a whole made up of integrated elements. Perls' gestalt therapy is an integrative therapy bringing together the disunified pieces into one, meaningful whole. The healthy person is one who has integrated the segments of his life.

The stress of the above experiences of the author and others seemed to be on the importance of non-verbal communication as a healing agent. This does not correspond to the experience which the author had as a participant in two groups led by highly qualified counselors in which the communication between participants was consciously kept on a verbal level.

The emphasis on verbal communication had also been made in four therapy groups and modified group counseling groups of which the author had been therapist or leader. The author, in one of the basic courses in pastoral counseling, had been warned by the professor to avoid

²Frederick Perls, Ralph E. Hefferline and Paul Goodman, Gestalt Therapy (New York: Delta, 1951).

physical contact with counselees either individually or in groups because even an accidental brush on the arm could be misinterpreted by a member of the opposite sex as an overt sexual act.

In the summer of 1968 the author began to experiment with communication between people which was beyond the verbal level. The results were both encouraging and exciting. Persons who had felt isolated and alone began to feel connected with others. Persons who had hidden behind intellectualism (which always needs to be expressed verbally) had to step out from their verbal screen in front of the mirror of others. And groups achieved a sense of relationship and oneness very rapidly.

In addition to the change in relationships between individuals, participants learned to be aware of themselves and the non-verbal messages which were coming from their own bodies. This was an integrative process.

James B. Ashbrook in an article calling pastoral counselors to re-examine the meaning of the physical in counseling, has written:

We are discovering that "communication" involves so much more than mere words. As one person referred to "body talk" on the part of the counselor, "I think it would be nice if that tape recorder could hear your nodding head and nice smile--just kind of encouraging the way your face talks to me. I've learned a lot about 'body talk' from you." Communication that heals and restores is something other than the sentence game of ping-pong in which words are batted back and forth without ever getting through to the other or even

really coming from inside the one hitting them. Communication that says something is set within the larger and deeper and broader setting of genuine personal communication, of the sharing of person with person as a whole being with a whole being.³

Ward A. Knights, Jr., Chaplain Supervisor of the Cleveland Psychiatric Clinic, found that the group therapy sessions of persons involved in clinical pastoral education often were less-productive than desired because of the reliance on verbalization. Mr. Knights reports:

It became increasingly obvious that behavior in the group session was often being curtailed and inhibited by irrelevant verbalization. Tender and aggressive impulses were often being suppressed because of fear that verbal expression would only increase the frustration of being unable to act upon the impulse. Many discussions continued beyond the group sessions, but even the most intense discussion did not satisfy the impulses. It then became increasingly apparent that group members were afraid of their impulses and lacked the means to give them healthy expression. It has been an interesting observation that, while many group members manifest quite mature personalities, the impulses arising from increasing self-awareness are often blocked because they have not been differentiated and assimilated. One reason may be that society does not allow free expression of our impulses. Also, in the past such expression had been discouraged even within the training program. When the natural fear of action was added to this we had one area of meaningful group experience missing entirely from our group therapy sessions.⁴

³James B. Ashbrook, "The Lost Dimension of the Physical: Some Preliminary Thoughts," Pastoral Psychology, XVII:161 (February 1966), 26.

⁴Ward A. Knights, Jr., "The Use of Self-Actualizing Group Therapy Techniques in Clinical Pastoral Training," Journal of Pastoral Care, XX:3 (September 1966), 163.

The author and others have become convinced of the importance of what Knight calls self-actualizing group therapy techniques, what others call sensitivity training, what the author calls therapeutic non-verbal communication experiences. The purpose of this paper, however, is not systematically to prove the importance of these; but rather to place the use of therapeutic non-verbal communication experiences in both a theoretical and theological perspective.

Definition of Terms

The definition of the individual words and the combined meaning of the phrase "therapeutic non-verbal communication experience" will be developed in Chapter II of this study.

The definition which needs to be made at this point is of "group pastoral counseling." It is not necessary to dwell on the "group" aspect of "group pastoral counseling" since many definitive statements have been made on the meaning of group counseling, group therapy, group psychotherapy, and so on. The need for definition focuses in the word "pastoral." What is the distinction between "group counseling" and "group pastoral counseling"?

Howard Clinebell feels that the distinction lies in the counselor-minister's clear "picture of the relationship between counseling and the basic purpose of the

church."⁵ Clinebell then points to a study by H. Richard Niebuhr and others of the many facets and demands of the church's ministry and their conclusion about the central, unifying, underlying task of the church:

When all is said and done the increase of this love of God and neighbor remains the purpose and the hope of our preaching of the gospel, of all our church organization and activity, of all our ministry, of all our efforts to train men for the ministry, of Christianity itself.⁶

Pastoral counseling is to be viewed as one of the several functions of the church and its ministry which help a person to increase his love of God and neighbor. A person who is emotionally crippled cannot love God or his neighbor maturely. Clinebell states:

For those whose ability to love is markedly crippled, counseling can mean the difference between a creative, productive Christian life and one of inner stagnation and self-rejection. For such persons, a skilled counselor becomes the instrument of God's healing and growth, a channel for his liberating love.⁷

The pastoral counselor understands that it is not he who creates healing and growth, but a reality which is beyond him who speaks through one man to another. The task

⁵Howard J. Clinebell, Jr., Basic Types of Pastoral Counseling (Nashville: Abingdon Press, 1966), p. 45.

⁶H. Richard Niebuhr, Daniel Day Williams and James M. Gustafson, The Purposes of the Church and its Ministry (New York: Harper & Row, 1956), p. 39.

⁷Clinebell, op. cit., p. 46.

of the pastoral counselor is to help tear down the barriers between the counselee and the healing, growth forces of God. The pastoral counselor is a "facilitator" and "catalyst"; he knows that his "effectiveness depends on his awareness that healing and growth take place through him rather than as a result of his psychological cleverness."⁸

Pastoral counseling, either individually or in a group, differs from therapy, either individually or in group, because there exists a knowledge and reliance on the healing and growth powers of Ultimate Reality beyond the finite human powers. The fact of God and his action may be only pointed to occasionally, yet this underlying assumption exists within the pastoral counseling situation.

Limitations of Study

This study seeks only to develop a theoretical and theological framework for the use of therapeutic non-verbal communication experiences in group pastoral counseling and is not intended in any way to be a handbook for the use of non-verbal techniques, or a catalog of such techniques.

The therapeutic non-verbal communication experiences reported in the latter part of Chapter IV will serve only as illustrations of how these experiences might fit into the broader theoretical and theological framework. The

⁸Ibid., p. 48.

author is a student of these experiences, still learning when and how they might be used with therapeutic results. The idea that the reported experience of the experimental group should be a model is untenable.

Organization of Dissertation

This study is organized in four sections. Chapter II will develop a theoretical framework of therapeutic communication, both verbal and non-verbal. Included in this development will be a definition of communication, of therapeutic communication, of non-verbal communication, and therapeutic non-verbal communication. The second section, Chapter III, will develop a theological framework by examining the Christian kerygma and making analogies between it and the therapeutic process. The therapeutic person will be shown to be a kerygmatic agent. The third section, Chapter IV, will present some basic considerations of group dynamics and the therapist's role within the group. Then, an analogy between the kerygma and therapeutic non-verbal communication experiences will be drawn based on the development of the second section. The final section of this study, Chapter V, will summarize the development of this study and draw tentative conclusions from it.

Sources

The sources for this study are divisible into three categories.

The first includes the experiences of the author as a staff counselor at the Claremont Area Pastoral Counseling Center and as a parish minister at the Edgewood United Methodist Church. In both places of experience, the author has participated in and been a therapist in group counseling, as well as in individual counseling. The practicum has proved invaluable in understanding the nature and method of pastoral counseling.

The second category of sources has been the literature in the field of human communication in pastoral counseling, and general counseling.

The third category of sources has been an experimental pastoral counseling group organized through the Claremont Area Pastoral Counseling Center, Claremont, California. This group of 10 persons understood and consented to the author's use of their experience as the informational basis of this dissertation. The group members completed "weekly reports of the group session" of their participation in the experimental group. Comments and descriptions used in Chapter IV have been authorized by the group members whose identities have been protected by the use of initials.

The author is grateful to Mr. Ron Ropp who acted as co-therapist for the last seven weeks of the group; and to Dr. Frank Kimper who helped organize the group and who faithfully and patiently listened to group sessions on tape to offer constructive supervision.

CHAPTER II

THERAPEUTIC COMMUNICATION

The primary task of this chapter will be to develop a theory and working definition of "therapeutic non-verbal communication." For the sake of simplicity, this task will be accomplished by the discussion of each element of this concept before an attempt is made to formulate a concise definition. First, there will be a presentation of the meaning of communication. Second, this will be expanded to define non-verbal communication. Thirdly, a definition of therapeutic communication will be developed. And finally, a synthesis will give a working definition of therapeutic non-verbal communication.

Human Communication

A definition. Communication is one of the most basic givens in human existence. To say that communication is important to existence is to greatly understate the fact; "communication means life or death to persons."¹

Communication in its broadest sense can be defined as all procedures and processes by which one entity affects and influences another entity. For the purposes of

¹Reuel L. Howe, The Miracle of Dialogue (New York: Seabury Press, 1963), p. 4.

this paper, entity should be limited to human entity.

Jurgen Ruesch defines human communication as including "all those processes by which people influence one another."² Wherever there is relatedness of individuals, there are the problems of communication.

Implicit in Ruesch's definition are two assumptions. First, "all actions and events have communicative aspects as soon as they are perceived by a human being."³ Perception is not limited to visual or audial perception, as we shall see below, but includes all awareness of the elements of our environment through any of our senses.

The second assumption implicit in Ruesch's definition is that "perception changes the information which an individual possesses and therefore influences him."⁴ The influence may be confirmation of existing concepts, additions to existing concepts, or revised concepts.

Communication for the human entity begins at the time of conception and continues throughout life. Ruesch divides this life span into eleven chronological "time scales."⁵

²Jurgen Ruesch and Gregory Bateson, Communication, the Social Matrix of Psychiatry (New York: Norton, 1951), p. 6.

³Ibid.

⁴Ibid.

⁵Jurgen Ruesch and Weldon Kees, Non-Verbal Communication (Berkeley: University of California Press, 1966), p. 6.

Intrauterine period: (40 weeks)	Organism responds to thermal, mechanical, and chemical stimuli.
Neonatal period: (first 12 weeks)	Infant learns to respond to tactile, auditory, and visual stimuli.
Babyhood: (3 to 24 months)	Mastery of head, eye, and hand movements (second quarter); trunk and fingers (third quarter); speech (second year).
Infancy: (2 to 5 years)	Interpersonal communication with one person at a time (mother, father, sibling, or relative).
Later childhood: (6 to 12 years)	Group communication with several persons at a time, especially with children of the same age and with emphasis on members of the same sex.
Adolescence: (12 to 18 years)	Interpersonal communication with members of opposite sex, growing attempts to communicate with members of out-groups.
Young adulthood: (19 years to late 20s)	Mastery of the complexity and heterogeneity of adult communication and the multiplicity of roles and diversity of rules. Communication with age superiors; the young adult is occupationally placed in a position of subservience; observes and follows orders.
Middle adulthood: (late 20s to mid 40s)	Peak of communication with age inferiors and children. Switch from role of perceiver and transmitter to position of greater responsibility.
Later adulthood: (45 to 65 years)	Intake of information and learning now displaced in favor of output of information, teaching, governing, and ruling. Participation in decision-making groups.

Age of retirement:
(65 to 80 years)

Preparation for relinquishment of power and gradual retirement from decision making. Philosophical considerations towards the end of life cycle. Symbolic and global treatment of events.

Old age:
(80+ years)

Life of retrospect, with emphasis on early memories.

Although these chronological time scales are subject to wide individual variation, this table is useful in tracing the development of human communication. It is clear from an examination of communication development that there is an interaction of the environment, whether it be person, thing, or situation, with the individual which affects and influences him; communication takes place.

Settings for Human Communication. Communication takes place in one or more of four settings: intrapersonal; interpersonal; group; and society.⁶

Intrapersonal communication is self-contained within the communicator himself, even though he may be involved in other communication settings at the same time. It is in intrapersonal communication that one experiences himself in feeling and thought.

When traces of past experiences are organized into entities--ideal, images, fantasies, or sentiments--the internal organization of the individual is experienced as consisting of several components. The communication

⁶This four-fold classification of human communication is found in ibid., p. 5.

carried on between these various entities is referred to as thinking and feeling.⁷

When intrapersonal communication breaks down, the entity loses touch with reality and his own experience within the environment.

Interpersonal communication carried on between several (2 or more) persons, has three distinct characteristics.⁸ First, there is the presence of some expressive action on the part of one or more persons. As we shall see below, this action may be verbal or non-verbal. Secondly, there is "conscious or unconscious perception of such expressive action by other persons."⁹ And thirdly, there is a return observation that the expressive action was perceived by others (perception of perception). "The perception having been perceived is a fact which deeply influences and changes human behavior."¹⁰

Group communication is that communication which takes place within a group (intra-group) or between separate groups (inter-group). Group communication may be structured as "(a) communication of one to many, (b) communication of many to one, (c) communication of many

⁷Jurgen Ruesch, Therapeutic Communication (New York: Norton, 1961), pp. 454-455.

⁸Ibid., p. 455. ⁹Ibid.

¹⁰Ruesch and Bateson, op. cit., p. 15.

to many."¹¹

In the first of these situations "the flow of messages is centrifugal, towards the periphery; the recipients usually are unable to reply immediately, and feedback is slow."¹² A classroom lecture is an example of the "one to many" group communication. In the "many to one" situation, the flow is reversed; it is centripetal. In this case messages often have to be condensed and abstracted to be manageable for the recipient. Abstractions and condensations introduce the possibility of distortions of the messages.¹³ Reporting to a supervisor in industry is an example of the "many to one" group communication.

In communication of 'many to many,' the messages of individuals are condensed into communiques which are issued by committees or spokesmen and are interpreted by committees or delegates of the other group. The speed of communication is slow, and response is delayed.¹⁴

Societal communication takes place when there are so "many" that individuality is lost and the individual becomes statistically considered. "Communication is considered an interaction of groups or large bodies of persons."¹⁵

¹¹Ruesch, Therapeutic Communication, p. 455.

¹²Ibid. ¹³Ibid. ¹⁴Ibid.

¹⁵Ruesch and Kees, op. cit., p. 5.

Among these four settings for human communication, it will be especially important for this study to consider the roles of intrapersonal communication and interpersonal communication. It is in these two settings that non-verbal communication will have its greatest import within the context of group pastoral counseling. There is no question that the individual involved in group communication and in societal communication is deeply influenced by the group and the society. Ruesch, although speaking out of his own experience, states nicely the reasons for limiting study to the intrapersonal and interpersonal communication setting.

In human communication, the unit of study is the total communication system and not any single person, organ system, or part function. A communication system is not determined by morphological criteria. Instead, the system is defined by that sector of the universe which is occupied by a network of communication. It does not matter whether, within such a system, signals originate from a pamphlet distributed by a governmental agency, from a human voice addressing another person, from the cerebral cortex firing efferent neurons to move a muscle, or from the adrenal cortex to pour out adrenalin. What matters is the perception of signals by another station of the network and its responses to the signal, regardless of how many stations participate and how much of the network is involved. For practical reasons, however, the study of the network may be confined to a social situation, to an association, or to the intrapsychic events of an individual.¹⁶

Before moving on to developing a definition of non-verbal communication, let us examine briefly three more

¹⁶Ruesch, Therapeutic Communication, p. 454.

aspects of human communication: the communication apparatus of man; the kinds of messages in human communication; and finally, some disturbances of human communication.

Communication apparatus of man. When an entity, biological or social, is able to receive signals, is able to sort signals, and is able to give its own signals, "it is prepared to enter into communication with other entities."¹⁷ The human being is uniquely equipped for the communication task.

The sense organs are the receivers, ready to register the impact of signals. The senses of touch, of hearing, of smell, of taste and of sight are each receivers of communication signals. These organs, as we shall see, may work in conjunction with each other or separately depending on the kind of message to be received. The effector organs are the senders of signals. The most obvious is the vocal instrument but the effector organs also include all parts of the body which are capable of sending signals. The writer's fingers on the typewriter keyboard is an example of non-vocal communication. As we shall see, although the vocal may be the most obvious, it may be in many circumstances the least reliable means of communicating.

In addition to the sense organs and effector organs, man is equipped with a communication center in which

¹⁷Ibid.

all incoming messages find a destination and from which all outgoing messages find an origin. The communication center is the central nervous system. This also performs the evaluative function of human communication; here scanning, memory, and decision-making take place.¹⁸

The final piece of communication apparatus possessed by the human being is the shelter for all the communication machinery. It includes all those parts of the body which house the effectors, receivers and evaluators.

Signals, Signs, Symbols, and Messages. A signal is a bit of information which is in transit whether it is perceived or not perceived. The red stop light is a signal whether the driver sees it or does not see it.

A sign goes beyond this to enscribe part of an action. "A sign constitutes a circumscribed part of an action or event which either by force of its own structure or because of attention paid to it possesses for an observer problem-solving properties or cue values."¹⁹

A symbol in communication is a device which has been agreed on by more than one entity to "refer in a condensed way to a series of actions or events . . ."²⁰ Symbols are extensively used to "code" messages so that

¹⁸Ibid., p. 456.

¹⁹Ibid., p. 453.

²⁰Ibid.

they may be transmitted. Each letter of these words are symbols for the sounds of the words, but codified so that the message can be transmitted by print.

In the group counseling situation there are many signals, signs and symbols which may be used to establish communication between participants. Each is important in the total communication network.

The purposive expression of a sign, signal, or symbol to convey information to another person becomes a message when there has been perception and interpretation by the other person.²¹ The perception and/or interpretation of the signal, sign, or symbol may be at variance with the purposive expression of the sender, but a message has been sent, nevertheless. We will examine this problem of disturbed communication below.

A message may be codified either analogically or digitally. When information is codified analogically it "constitutes a series of symbols that in their proportions and relations are similar to the thing, idea, or event for which they stand."²² A map is an analogic codification of a given piece of geography. An embrace is an analogic codification of a feeling between the embracees.

²¹Ibid., p. 454.

²²Ruesch and Kees, op. cit., p. 8.

Digital codification deals with "discrete step intervals."²³ Words exemplify digital codification. Because words are digital, it is difficult to use them to describe accurately non-digital situations. Human feelings and emotions are non-digital, and are, at best, poorly codified into words.

The difficulty of using words (digital codification of information) to communicate relationships, meanings, and human feelings is especially important to the study at hand. The inadequacy of words forces a consideration of analogic forms of communication. Non-verbal communication experiences are analogic codifications of information.

Let us turn briefly now for a consideration of things which disturb communication.

Disturbances of communication. Communication is disturbed whenever the meaning of the message is perceived and interpreted in a distorted fashion.

Reuel Howe, who limits his definition of communication to that instance when the meanings of the sender are perceived and interpreted accurately by the receptor,²⁴ says that barriers to communication are those things which keep meanings from meeting.²⁵

²³Ibid.

²⁴Howe, op. cit., p. 23.

²⁵Ibid.

Howe lists five particular barriers to communication. These he calls "ontological needs of every human being,"²⁶ the need and concern which each person feels for his own existence or being.

Every person, because he is both finite and burdened with a sense of guilt, lives with anxiety in relation to known and unknown threats to his being . . . We are all looking . . . for guarantees and reassurances of being, and for the courage to go on being. This search for affirmation and reassurance sometimes draws us nearer to our fellows; at other times it separates and alienates us from them. Our self-concern not only sets us apart from our brothers but also makes it difficult for us to communicate with them or to hear their cry in behalf of their own ontological concerns.²⁷

Howe's five communication barriers are the language barrier, the image barrier, the anxiety barrier, the defense barrier, and the purpose barrier.²⁸

The language barrier arises because language is not exact and precise. Language may or may not be verbal language. On the continuum from highly digital language (message codification) to highly analogic language there is increasing possibility and probability of different meanings for different people. There is a wide range of shadings and variations which come from individual associations and experiences. Howe gives the example of the

²⁶Ibid., p. 21. ²⁷Ibid., p. 25.

²⁸Ibid., pp. 26-31 includes full discussions of these barriers.

emotional accompaniments to some words: "Such words as 'hospital,' 'operation,' 'sickness,' can arouse so much emotional response that people hear them as a death sentence rather than as healing, health, and life."²⁹

The image barrier arises when communicators, on the basis of prejudice, filter all communication through the screen of prejudice. Howe gives the example of the Episcopal minister and the Southern Baptist minister who distorted most of what each other said because of their preconceptions of what the other was like.³⁰

The anxiety barrier exists when the communicators are anxious about themselves or their roles or the subject matter. Howe uses the example of agenda anxiety which often blocks communication between a minister or teacher and those to whom he would communicate. Agenda anxiety is the anxiety "to get across all the points of whatever subject they are dealing with, regardless of the state of being of those whom they are teaching."³¹

The defense barrier arises from the fact that "all of us, because we are human and vulnerable, function with certain well-established defenses in the interest of our personal and professional well-being."³²

²⁹Ibid., p. 28.

³⁰Ibid., p. 29.

³¹Ibid., p. 31.

³²Ibid.

The final communication barrier is holding contrary purposes. Howe gives the example of a husband who is trying to justify his point of view, whereas his wife may be wrestling with her own position and is thus resenting and resisting her husband's attempts to dominate her.³³

Howe sees these barriers as arising from ontological concerns.

. . . The problems of language, images, anxieties, defenses, and purposes all exist as barriers to the meeting of meaning and as blocks to the accomplishment of the purposes of communication. And . . . they are psychological and emotional symptoms of the deeper barrier which is the ontological one, our concern for our being.³⁴

Ruesch sees communications disturbances in a much more functional light.

Disturbances of communication arise when messages are too intense or too weak, when messages are too early or too late, or when they are inappropriate to the situation. Any disturbance of intensity, timing, or appropriacy may interfere with the feedback mechanisms and their regulatory effects.³⁵

Ruesch then categorizes disturbances of communication into individual situations and multiperson situations.

Individual disturbances may arise from:

- Disease, trauma, or malformation of the organs of communication, in which case the functions of perception, evaluation and expression will be affected.
- Insufficient mastery of nonverbal or verbal

³³Ibid.

³⁴Ibid.

³⁵Ruesch, Therapeutic Communication, p. 461.

denotation and language, in which case the sign processes will suffer.

- Insufficient or erroneous information about self and about others, in which case erroneous action will be the result.
- Insufficient mastery of metacommunicative devices--both instructive and interpretative--so that an individual's actions are misinterpreted and he in turn misinterprets the behavior of others.
- Inability to correct information because of inadequate skill in the use of feedback circuits, both intraorganismic and interpersonal.³⁶

Multiperson disturbances may arise:

- If the communications of one person or group are not responded to by the communications of another person or group, the two social entities do not join in a common feedback circuit. In the absence of self-steering properties, disturbances of communication are the result.
- If the feedback devices in a large network do not work properly, a coalition of people may set up a separate network within the larger system. Thus a new sub-system with different rules, feedback circuits, and codifications is established which may be tolerated or excluded by the people who form the larger system. But in any case, it brings about difficulties of communication.³⁷

Howe's formulation of communication barriers is not at variance with Ruesch's more functional approach; the stress simply comes at the more basic ontological question. Communication breakdown between one individual and another individual or his environment may well have functional origins, but the meaning has ontological implications.

³⁶Ibid.

³⁷Ibid., p. 462.

Not only is it more likely that there will be disturbances in the ultimate questions of meaning, relationship and feelings, but it is also most difficult to find an analogical language which will communicate. To complicate this matter even more, analogic languages, as we have stated, are more likely to be disturbed because of their relational character and because of the imprecision of analogic denotations.

Within the group pastoral counseling situation, persons come desiring to communicate issues with great ontological importance which requires a language which will communicate relationships, feelings, and meanings. It is extremely important, therefore, that both therapist and group learn to recognize and respond to communication beyond the verbal level. Elimination of communication disturbances in order to improve the processes of communication between the self and others

is one of the goals of all psychotherapies, whether the therapist is consciously aware of this or not. To bring man closer to the whole reality of himself and others involves expanding his awareness of and capacity to utilize channels of communication which are potentially available to all men.³⁸

³⁸Milton Berger, "Nonverbal Communications in Group Psychotherapy," in Max Rosenbaum and Milton Berger (Eds.), Group Psychotherapy and Group Function (New York: Basic Books, 1963), p. 424.

Non-Verbal Communication

A definition. In the relationship of man to man, much of the communication is non-verbal. Berger offers this comprehensive definition of non-verbal communication: "Nonverbal communications are all those manifest and latent messages, other than verbal, which reach ourselves and others about ourselves and others and the time-space continuum of the world we live in."³⁹

The manifest and latent messages, as we have seen, are perceived through our bodily senses (seeing, hearing, smelling, tasting, touching) and then evaluated through "thinking, feeling, dreaming, intuiting as well as extra-sensory and other ways still unknown but in process."⁴⁰

Berger makes the very significant point that "that which is communicated by its absence is often at least as significant if not more significant than that communicated by its presence."⁴¹

Awareness of the amount and variety of non-verbal communication in group counseling provide valuable additions for the individuals within the group. Berger sees the use of non-verbal communication as a means of lessening failures in therapy.

Emphasis on non-verbal communications decreases overfocus on words, intellectual insights, and

³⁹Ibid.

⁴⁰Ibid.

⁴¹Ibid., p. 425.

understanding of psychodynamics which do not sufficiently stimulate and motivate patients toward being, toward self-realization, toward that dynamically knowing self which inherently implies accepting self with and without understanding.⁴²

Non-verbal communications from a person often are more significant than the verbal.

Group members learn through experiencing in the group situation how a person is really being rather than what he is saying or doing is of prime significance in their attitudes toward him and themselves when they are with that person or persons. They learn that non-verbal communications play the most significant communications role in all their relationships.⁴³

Putting the definition of "non-verbal communication" in terms of the original definition of "communication," non-verbal communication is all those procedures and processes, other than verbal, by which one person affects and influences another person.

Non-verbal languages. Verbal and non-verbal languages rely on different receptor organs and use different effector organs.

Verbal language is perceived primarily by the ear, with a negligible amount of aid from visual perception of words being formed. Silently-given sign language, such as that given by the hitch-hiker, is perceived exclusively by the eye. Each form of language appeals to different sensory apparatuses.

⁴²Ibid.

⁴³Ibid.

Ruesch draws a distinction between three categories of non-verbal language: sign language, action language, and object language.

Sign language is defined as words, numbers, punctuations which become supplanted by gesture.⁴⁴ The deaf language is clearly sign language. Sign language is perceived by the visual organ in much the same way that verbal language is perceived by the ear.

Action language is defined as "all movements that are not used exclusively as signals."⁴⁵ Walking, drinking, scratching all serve personal needs and constitute a message about that need.

"Action language is transitory, although at the same time represents the most universal kind of language."⁴⁶ Action language is the prime way in which emotions are expressed.⁴⁷ Tears in the face of grief is universally understood. A fist slammed onto the table of a drawn-out, deadlocked meeting cannot be misunderstood. Other persons at such a table would almost by necessity react with avoidant, protective, or angry reactions.

By making a switch from words to action, the referential properties of language are abruptly shifted from conflict to a context in which agreement may be possible. By means of such expression, the

⁴⁴Ruesch and Kees, Non-Verbal Communication, p. 189.

⁴⁵Ibid.

⁴⁶Ibid., p. 192.

⁴⁷Ibid.

discussants are capable of re-establishing contact, and may either resume their verbal discussion or separate altogether. In any event, the deadlock is broken.⁴⁸

Action language is perceived by the eye and by the ear for the greatest part. To a lesser degree, action language may be perceived by the sense of touch (sensitive to temperature, vibration, movement, etc.). And it is possible that action language may also be perceived by the senses of smell and taste.

Object language is defined as

all intentional and non-intentional display of material things, such as implements, machines, art objects, architectural structures, and--last but not least--the human body and whatever clothes or covers it.⁴⁹

Object language appeals to the sensors of distance and closeness. Here the senses of smell and taste may be the perceivers. The message sent by a man with body odor will be perceived by the sense of smell and will have a great effect on the positions of persons in a communications network.

Object language in the form of clothing has a special place in raising role expectations--a message of role is communicated. The policeman in uniform may communicate a message of authority. The clergyman in clerical attire may communicate a message of piety and religiosity.

⁴⁸Ibid.

⁴⁹Berger, op. cit., p. 426.

The hippie dressed in an off-beat fashion may communicate rebellion which seems to be a special threat to the establishment.

Sign language, action language, and object language are the three non-verbal languages. These languages have prime importance in communicating in situations where words would fail completely.

Learning to read, and be self-consciously aware of, these non-verbal languages within the context of group pastoral counseling provides valuable clues and information necessary for the establishment of accurate personal communication.

Non-verbal communications are aspects of a participant's total functioning and "are used in the service of healthy and unhealthy character-structure trends and express the compulsive neurotic trends overtly and covertly."⁴⁹ Berger gives an example of how reading non-verbal languages may be used:

. . . The resigned, detached individual with marked alienation from self and people, described . . . as 'emotional illiterates,' that is, those who do not adequately know the language of feelings, attempt consistently to deny or hide from verbal or nonverbal awareness and expression of feelings. The moment the group or therapist comments on nonverbal signs that such persons have been reached or touched emotionally by some interaction process, they reflexively activate all their defenses aimed at controlling and squelching

⁴⁹Ibid.

and manipulating feelings. Faced with incontrovertible evidence that they have been "caught," is experienced by such patients as if in a criminal act, feeling feelings, especially tender sentiments, which to them means weakness, such a patient may react with face-flushing embarrassment or reddening suffusion of his eyes. He may attempt to divert attention from what is going on by provoking laughter at his own expense or by expressing hostility toward the therapist.⁵⁰

Non-verbal communications, when recognized, can help one to see a drive for power expressed by a group participant, or the attempt to depreciate the self by a self-effacing member of the group.

Resistances to the group process can be seen in non-verbal languages which would be hidden if left to the normal verbal process. Berger itemizes these resistances:

Nonverbal communication of resistances in the group are expressed to us in the occurrences of the following:

- (a) silences; absences from regular or alternate sessions; physically absenting oneself from a session during a session ostensibly to go to the toilet, to leave early because of a previously arranged appointment, to go out for a glass of water, for cigarettes, or to cry in privacy; spiritually absenting oneself during a session by daydreaming or "listening without listening"; lateness;
- (b) body language, expressed with the body as object or in motion, or gestures, as with a tight, defiant face, a clenched fist and held-in body or sitting with one's chair back from the group circle;
- (c) acting out, e.g., the patient who comes into the group and stretches out on the floor to provoke the therapist and group;
- (d) the sudden appearance of signs of fatigue, sleepiness, yawning, or looking blank; or

⁵⁰Ibid.

restlessness and looking at one's watch;

(e) a return to former modes of gait, dress, and manners to indicate superior status and to decrease relatedness with peers and therapist.⁵¹

Two of these "resistances" deserve broader treatment, taking them from the realms of resistances into important forms of non-verbal communication. We will deal briefly with 'silence,' and then more substantially with 'body language' as forms of non-verbal communication.

Silence. Silence within a group setting does not mean that nothing is going on, although this may be the case. Most often silence is filled with non-verbal communications between group participants.

Silence may indicate togetherness, the sense of just being with others who are also just being. Or silence may communicate lessening tension or

increasing sense of belonging, an increasing capacity to sit in and with feelings and fantasies and thoughts of all types with less judgmentalism, increasing awareness of self-limits and the rights, pressures, and tensions of others, and may promote integrative processes.⁵²

Silence is a form of non-verbal communication which can be valuable in the meeting of persons on a significant level. Silence in this case is a language.

Body language. Body language may be either an action language or an object language or both.

⁵¹Ibid., p. 427.

⁵²Ibid., p. 428.

Non-verbal communications are expressed through total appearance, clothes, body mass, height, and configuration; smells, skin reactions, specific features, and deformities; movements and gestures in gait; walking, standing and sitting postures; head, facial, trunk, arm, hand, finger, leg, foot, and other movements; facial and eye expressions with major emphasis on looks and looking, smiles, laughs, yawns, and tears; respiratory movements, rhythm, depth, and sighs, intestinal gurglings, muscle fibrillations, tics, and attitude toward own sex and body image. Vocal intonations are included by some as non-verbal communications and are most revealing of the inner truth.⁵³

Berger lays particular emphasis on the role of the eyes, the face and hands as major effectors in non-verbal communications.⁵⁴ The eyes are probably the most significant of the non-verbal communicative apparatuses because of their expressive quality and because of the importance of visual perception. Facial expressions (smiles, winces, absence of expression, tightness, etc.) are all revealing of what is going on within the person.

Feelings and behavior find expression in terms of the parts of the body, of body movement, and of body functions. Schutz makes the interesting observation that there is implicit recognition of the close tie between the emotional life of man and his body language. This tie is evident in the verbal idioms which have definite feeling and behavior meanings.⁵⁵ A partial list of these idioms include:

⁵³Ibid., pp. 428-429.

⁵⁴Ibid., p. 429.

⁵⁵William C. Schutz, Joy, Expanding Human Awareness (New York: Grove Press, 1967), p. 25.

lost your head
 save face
 no guts
 my aching back
 spine-tingling
 elbow your way
 keep in touch
 itching to do it
 sucker
 vent your spleen

stiff upper lip
 bare your teeth
 catch your eye
 big mouth
 open arms
 tight-fisted
 no balls
 twist your arm
 give him a hand
 watery knees.⁵⁶

In a process which he calls "retroflexion" Perls suggests that persons internalize what originally they tried to do, or did, to others. He states:

An extremely useful method of grasping the meaning of particular aches or tensions is to call up appropriate expressions of popular speech. These invariably contain long-tested wisdom. For instance: I am stiff-necked; am I stubborn? I have a pain in the neck; what gives me a pain in the neck? I stretch my head high; am I haughty? I stick my chin out; am I leading with it? My brows arch; am I supercilious? I have a catch in my throat; do I want to cry? I am whistling in the dark; am I afraid of something? My flesh creeps; am I horrified? My brows beetle; am I full of rage? I feel swollen; am I ready to burst with anger? My throat is tight; is there something I can't swallow? My middle feels queasy; what can't I stomach?⁵⁷

Perls states that even the smallest bit of body language is important and that much of his therapy, especially in the early sessions, centers around teaching the patient to 'read' his body language. The writer witnessed Perls' work with a young woman for a period of time. After a brief introduction, he called attention to the

⁵⁶Ibid., pp. 25-26.

⁵⁷Frederick Perls, Ralph E. Hefferline and Paul Goodman, Gestalt Therapy (New York: Delta, 1951), p. 165.

hands of the patient, the right hand was cradling and massaging the left hand. The young woman was asked to have a conversation between her hands. The verbalized conversation of the right hand to the left revealed feelings of aggression, of anger. The verbalized statement of the left hand to the right hand revealed a need to be 'taken care of' and caressed. After this brief conversation, the young woman resumed her narrative. Very shortly Perls stopped her to ask her to listen to what her voice sounded like (it had been very level and controlled during the recounting of a rather painful experience). Several more times during the interview, Dr. Perls called attention to such pieces of body language as the rate of breathing, movement of the foot, a particular hand gesture.⁵⁸ In each case information was gained by both the patient and therapist about what was going on inside.

Therapeutic Communication

A definition. Ruesch gives this definition of "therapeutic communication": "Therapeutic communication differs from ordinary communication in that the intention of one or more of the participants is clearly directed at

⁵⁸The writer observed this demonstration therapy session during the proceedings of the Annual Convention of the American Association for Humanistic Psychology in San Francisco on August 28, 1968.

bringing about a change in the system and manner of communication."⁵⁹ Therapy may be defined as "a special kind of teaching or training which attempts to accomplish in a relatively short, intense period what should have been established during normal growing up."⁶⁰ The person who gives this teaching and training is the therapist. A group of several people with the intent of bringing change through new communication is a therapeutic group.

The process of therapeutic communication is that of teaching and training individuals by exposing them "to situations and message exchanges which eventually will bring about more gratifying social relations."⁶¹ In addition to more gratifying social relations therapeutic communication will put an individual in touch with his own inner life, giving him gratifying intrapersonal experience.

Therapeutic communication can take place in any setting, at any time. It is not limited to an "appointment hour," but can exist in a church, in a hospital, in a home, or in a classroom. Therapeutic communication presupposes that in the communication network there is one person who

⁵⁹Ruesch, Therapeutic Communication, p. 460.

⁶⁰William Glasser, Reality Therapy (New York: Harper & Row, 1965), p. 20.

⁶¹Ruesch, Therapeutic Communication, p. 460.

is wiser, more mature, and more able in communication than others. When this person uses his skill to aid others to maturity, he is engaging in therapeutic communication.⁶²

"The criterion of whether an exchange becomes therapeutic or not is tied to the perception that the other person has a certain readiness to understand, to acknowledge, and to reply."⁶³

The person with communication skills and desire may communicate therapeutically through almost any role: therapist, doctor, nurse, clergyman, teacher, social worker, neighbor and friend. Therapeutic communication is not a method, nor is there any one methodology to the exclusion of others which produces better communicative resources. Ruesch makes the point that:

Therapeutic communication is not geared towards making a superman out of the patient; it is designed to enable the patient to experience fully, to accept what he has experienced, and to share these experiences with others. Once he is capable of doing so, he will find an equilibrium which will provide for more basic satisfactions. Therapeutic communication strives not towards conformity or adjustment but towards self-realization of the patient. This does not mean that lawlessness, acting out, complete withdrawal, or other forms of social or anti-social behavior are silently tolerated. No, on the contrary, this kind of behavior has to be corrected. But instead of judging and condemning, the therapist tries to understand the message that is coded in the patient's action behavior. A careful review usually reveals that whatever the message may be, more appropriate forms of expression and action can be worked out. This brings the patient

⁶²Ibid., p. 31.

⁶³Ibid.

closer to self-realization and does not conflict with law, tradition, or custom.⁶⁴

To restate our definition, therapeutic communication is that purposive, intentional communication from one or more persons designed to bring about growth, maturity, and self-actualization in one or more other persons. This can happen in any setting, and has as its goal self-actualization and not necessarily conformity.

The Therapeutic Communicator. Implicit in therapeutic communication is the existence of a skilled, mature, and wise communicator, as we have seen. It is important at this point to expand the description of the therapeutic communicator beyond "skilled, mature, and wise."

Howe calls the therapeutic communicator a "dialogical person" which he defines as ". . . one who, by word or relationship, is in communication with his environment and open to the communication that environment offers, environment in this sense including both persons and things."⁶⁵ He then goes on to list four qualities of the dialogical person.

First, "The dialogical person is a total, authentic person."⁶⁶ By this Howe means that the person approaches the environment with his total being, not just a part of

⁶⁴Ibid., p. 37.

⁶⁵Howe, op. cit., p. 69.

⁶⁶Ibid., p. 70.

the being. The dialogical person

. . . is really present; he does not run off on 'errands' while he seems to be listening to the person before him. He is an authentic person, too, in the sense that he is able to learn as well as to teach, to accept love as well as to love, to be ministered unto as well as to minister.⁶⁷

Second, "The dialogical person is an open person . . ."⁶⁸ Openness means the willingness to be known by other people, not just in a biographical way, but in "meaning to which his fellows may make free response."⁶⁹ In such openness there are risks: the risk of rejection, the risk of distortion and misperception, and the risk of no response. Openness is a two way street; not only is the dialogical person open from himself to others, he is able to hear and receive the communication from others.⁷⁰ He is aware of his responsibility to listen. A third aspect of openness is that the dialogical person ". . . must also be open to the meaning and influence of the dialogue itself."⁷¹ There is a mutual affirmation within the communication system which arises from the content of the communication and from the existence of two persons in communication. Mutuality is a necessary element in

⁶⁷Ibid. ⁶⁸Ibid., p. 71.

⁶⁹Ibid., p. 72. ⁷⁰Ibid., p. 74.

⁷¹Ibid., p. 75.

participation. Each person within the communications network must be allowed to participate in the meaning of each other person.⁷² ". . . The dialogical (person) is one who is free to reveal himself, to accept the revelations of others, and is open to the meaning of the dialogue between them."⁷³

Third, "the dialogical person is a disciplined person."⁷⁴ Howe means disciplined in the sense of taking responsibility for oneself and others, accepting limitations and opportunities which are offered between the communicants. The responsibility is twofold: first, to speak and act when there is need to speak and act regardless of the risks involved. This includes the risk of changing previous opinions and thoughts by giving oneself to the truth and letting come what may. Howe puts it this way:

The dialogical person must be prepared to participate in the discipline of great dialogue, out of which true creativity is born. Have we not all had the experience of finally submitting our question or thought to a group of peers and then seeing emerge from the painful yet exciting wrestling with the truth and insight or understanding that was greater and more profound than that offered by any single contribution? So tremendous is this experience that we find it easy

⁷²Ibid., p. 77.

⁷³Ibid., p. 78. Word "person" substituted for "teacher or minister."

⁷⁴Ibid., p. 78.

to believe that God was in the midst and that through our dialogue he made us participants in his revelation.⁷⁵

The second part of being a disciplined person, according to Howe, is to "hold oneself to one's own part and leave others free to respond and initiate as they will."⁷⁶ To do this means to recognize the uniqueness of each individual without assumption that any other person can know what responses will be made by another. Giving another freedom requires that the dialogical person rid himself of preconceptions, images, prejudices, and assumptions which are a source of alienation and separation between beings. Howe pleads, "Let us, therefore, in speaking and acting, practice the discipline of waiting for the response, and then engage with it as honestly as we can."⁷⁷

Fourth, "the dialogical person is a related person."⁷⁸ Relatedness in this sense means awareness of the interdependence of human beings as they exist. This interdependence is expressed in our need for structures of human relationship and our responsibility for maintenance of these structures. Howe calls this "acceptance of each

⁷⁵Ibid., p. 79.

⁷⁶Ibid., p. 80.

⁷⁷Ibid., p. 81.

⁷⁸Ibid., p. 82.

other in structures of relationship." Relatedness is necessary to life and love.

. . . If persons do not accept each other in the structures of relationship, there can be no dialogue. But it is in dialogue that acceptance is given and received. The word spoken in dialogue is an act of faith done in spite of the doubt that it will do any good. The dialogical word is an open word, a word of beginnings, because it is a word of expectation inviting response. In speaking the word of dialogue a person puts himself on the threshold of truth and becomes the servant of God. Faithfulness, therefore, to the call of God is to be measured not in terms of the propositions of belief, but in terms of willingness to give ourselves to one another, and in that giving to be open to his working through us to one another.⁷⁹

Howe's "dialogical person" is what we have called a therapeutic communicator. His qualities of authenticity, openness, discipline and relatedness are very close to the qualities which Rogers feels must be part of the therapeutic relationship.⁸⁰

The first quality which Rogers sees as necessary is "empathetic understanding."⁸¹ In the therapeutic relationship one person is able to enter into another's world of meanings and deepest feelings. To do this requires that there be real awareness of the communication on the very deepest levels and in all languages.

⁷⁹Ibid., p. 83.

⁸⁰Carl R. Rogers, Counseling and Psychotherapy (Boston: Houghton Mifflin, 1942), p. 87ff.

⁸¹Ibid., p. 87.

A second quality of the therapeutic relationship is "congruence." By this he means that the therapeutic persons be integrative, have openness and a sense of inner genuineness. "The most basic learning for anyone who hopes to establish any kind of helping relationship is that it is safe to be transparently real."⁸² Clinebell notes that the opposite of congruence is "being phony" or "putting on an act."⁸³ Incongruity is the disparity between the verbal language and the non-verbal communication.

A third quality of the therapeutic relationship is "acceptance," and "permissiveness," which have a close interplay. The therapeutic person is permissive in regard to expression of feeling.⁸⁴

By the counselor's acceptance of his statements, by the complete lack of any moralistic or judgmental attitude, by the understanding attitude which pervades the counseling interview, the client comes to recognize that all feelings and attitudes may be expressed.⁸⁵

The fourth quality of the therapeutic relationship is "unconditional positive regard." This is an expression

⁸²Carl R. Rogers, On Becoming a Person (Boston: Houghton Mifflin, 1961), p. 51.

⁸³Howard J. Clinebell, Jr., Basic Types of Pastoral Counseling (Nashville: Abingdon Press, 1966), p. 295.

⁸⁴Rogers, Counseling and Psychotherapy, p. 88.

⁸⁵Ibid.

of "genuine interest in the client and an acceptance of him as a person."⁸⁶ Rogers states of the relationship:

Actually it is only the experience of a relationship in which he is loved (something very close, I believe, to the theologian's agape) that the individual can begin to feel a dawning respect for, acceptance of, and finally, even a fondness for himself. It is as he can thus begin to sense himself as lovable and worthwhile, in spite of his mistakes, that he can begin to feel love and tenderness for others.⁸⁷

Clinebell says of unconditional positive regard:

Unconditional positive regard is a blend of warmth, liking, caring, acceptance, interest, and respect for the person . . . The counselor becomes a companion-guide in a warm, human relationship which helps the person find courage to face his situation, bear his load, or go on the often frightening journey into unexplored areas of his personhood. Unconditional positive regard, in Buber's familiar terms, is the counselor's ability to establish I-Thou relationships.⁸⁸

To Roger's four qualities of a therapeutic relationship Clinebell adds two more categories: "a sturdy sense of one's identity as a person" and a "therapeutic attitude."⁸⁹ To avoid "being pulled down in the hole" with the counselee, the counselor needs "that firm sense of his identity, personal worth, and competence which are at the nucleus of ego strength. A counselor is able to be

⁸⁶Ibid., p. 87.

⁸⁷Carl R. Rogers, "Review of Reinhold Niebuhr's The Self and the Dramas of History," Chicago Theological Seminary Review (January 1956), 14, as quoted by Clinebell, op. cit., p. 295.

⁸⁸Clinebell, ibid., pp. 295-296.

⁸⁹Ibid., pp. 296-297.

'sensitive and responsive to the needs of others' to the degree that he possesses this strong inner awareness of his own value and personhood."⁹⁰

The "therapeutic attitude" is a result of a "vivid awareness of one's affinity with the sickness and sin, loneliness, alienation, and despair of the disturbed person."⁹¹ This identification with essential humanness requires "an inward surrender of subtle feelings of self-idolatry and spiritual superiority."⁹² It is the awareness of "there, but for the grace of God, go I."

An interim summary. To this point in this chapter, communications have been defined as all those processes by which one person influences another. Communications take place in intrapersonal, interpersonal, group and societal settings. The communication apparatuses of man are the sense organs, the effector organs, the interpretative apparatuses, and the housing for the other communication machinery. Messages are codified, sent, received, and evaluated in either a digital form (discrete, logical step intervals) or analogical form (which is proportional, representational, and relational). Words are digital and inadequate to convey fully non-digital messages. Communications are disturbed between people for a variety

⁹⁰Ibid., p. 297.

⁹¹Ibid.

⁹²Ibid.

of functional reasons all which have their root in an ontological concern for being.

Non-verbal communication has been defined as all those procedures and processes, other than verbal, by which one person affects and influences other person(s). Non-verbal languages include sign language, action language, and object language each of which rely on different receptor organs. Since emotions, feelings, and questions of deep ontological import require analogical codification for communication, it is necessary to give serious consideration to languages which will appropriately and accurately communicate. Body language is a special case of action and object language which codifies the internal feelings and conditions of a person in a unique way.

Therapeutic communication has been defined as intentional and purposive communication by one person in order to bring a change in another person. Therapeutic communication is not a methodology, but a description of process which can occur within the context of a number of therapeutic models.

The therapeutic communicator (therapist) is described as authentic, open, disciplined and related. The qualities of the therapeutic relationship include empathetic understanding, congruence, acceptance, permissiveness, unconditional positive regard, a sense by the

therapist of his own identity, and a therapeutic attitude.

Therapeutic Non-Verbal Communication

Wise gives an excellent illustration of therapeutic non-verbal communication when he describes an incident at Worcester State Hospital where a schizophrenic patient rebuffed completely the staff doctor by remaining in a non-communicative state. Sullivan, who was on hand, asked to try his hand with the patient. Wise relates:

Sullivan's first move was to edge his chair just a little closer to that of the patient and to lean forward so that he could look directly at the patient in a very friendly, warm manner. To the amazement of all, the patient responded to every question and comment that was made by Dr. Sullivan. For half an hour or more they conversed together, seemingly oblivious to the fact that there was anyone else in the room.⁹³

The really therapeutic part of the communication as described here by Wise was not the content of the verbal conversation, but only the fact that one person responded to another. And from all indications the patient's response was made to Sullivan's non-verbal communication that he cared, as one person to another person, not as a doctor functioning in a demonstration session.

Therapeutic non-verbal communication is all communication, other than verbal, in which the intention of

⁹³Carroll A. Wise, "The Psychiatric Interview," Pastoral Psychology, V (November 1954), 57.

one or more of the participants in the communication network is aimed at helping one or more of the other participants "handle their problems of living more adequately and grow toward fulfilling their potentialities. This is achieved by helping them reduce the inner blocks which prevent them from relating in need-satisfying ways."⁹⁴

There are two aspects to therapeutic non-verbal communication. First, there are the non-verbal communications found in relationship with the therapeutic communicator and others. And second, the non-verbal communications which each of us constantly make, but may be totally unaware of.

Therapeutic non-verbal communication can be programmed so that an individual may become aware of latent abilities, hidden talents, and undeveloped capacity. The programming is what the writer has called therapeutic non-verbal communication experiences. Others have called such experiences "games," "sensitivity training exercises," "awareness training exercises," and so on. By whatever name these experiences are called, their aim is to help individuals and groups become aware of themselves and their environment.

⁹⁴Clinebell, op. cit., p. 20.

The purposes of therapeutic non-verbal communication experience are four-fold. First, to provide information about the self and the self's relationship to all elements of the environment. Second, to elicit a decision in action which is based on the information gained. Third, to bring to life sensory awareness which has been dulled and is lifeless. And fourth, to give a person a sense of awareness of the self, of being, of existing as a person.

Schutz calls the achievement of these purposes JOY.

He states:

The theories and methods (of therapeutic non-verbal communication experiences) are aimed at achieving joy. Joy is the feeling that comes from the fulfillment of one's potential. Fulfillment brings to an individual the feeling that he can cope with his environment; the sense of confidence in himself as a significant, competent, lovable person who is capable of handling situations as they arise, able to use fully his own capacities, and free to express his feelings. Joy requires a vital, alive body, self-contentment, productive and satisfying relations with others, and a successful relation to society.⁹⁵

Howe sees the results of communication (dialogue) in four different ways.⁹⁶ He speaks specifically of "dialogue," which of course includes all forms of communication including verbal; but the author feels that

⁹⁵Schutz, op. cit., p. 15.

⁹⁶Howe, op. cit., pp. 119-121. Howe's scheme has been modified by the assumption that the results of therapeutic non-verbal communication experiences are substantially the same as of "dialogue." The author feels this is a valid assumption because both open communication possibilities with ontological importance.

these four changes are also produced in the situation where there is emphasis on therapeutic non-verbal communication experiences.

The first change is that such interaction forms persons who have the qualities of authenticity, openness, discipline and relatedness. The experience of communication, verbal or non-verbal, reveals and provides resources to overcome the barriers of communication. The non-verbal experience, because it keeps one from hiding behind words and discourages "intellectual ping-pong," is unique in its ability to form "dialogical persons" of the participants.

The second change possible in therapeutic non-verbal communication experiences is in the meaning of experience. "Our experiences of suffering, disappointment, disillusionment, and conflict are changed from signs of failure and doom to occasions for possible renewal."⁹⁷ The honest examination of, confrontation with, and acceptance of the painful realities which are part of human existence open the possibility to find "strength and fulfillment beyond them."⁹⁸ In that therapeutic non-verbal communication experience reveals reality in a unique way; there is unique possibility to deal with and grow from the revealed reality.

⁹⁷Ibid., p. 120.

⁹⁸Ibid.

A third change possible from therapeutic non-verbal communication experiences is awareness of new alternatives to living life; there are new possibilities. Howe states this well:

Real life--life that is life--is meeting, meeting between person and person. The excitement and promise of any gathering of people springs from the possibility that two or more persons, living most of the time in some degree of loneliness, will rendezvous, like two astronauts, in the infinity of relationship, and from this meeting, move on to discover new worlds of meaning. Many of our relationships are realizations of this possibility; yet, tragically, to many of them are tombs in which the possibilities of meeting are buried. But the person, whose character and expectations have changed his capacity to speak and to leave the other free to respond, finds that what had appeared to be drab human situations have become occasions for new adventure. So far as the meaning of relationships and life is concerned, we are like prospectors for gold, walking aimlessly back and forth over the richest of lodes, without knowing the wealth that is beneath our feet.⁹⁹

Therapeutic non-verbal communication experiences open new and previously untried ways for persons to meet persons; and, in the new meeting, comes new possibility for life situations.

Finally, therapeutic non-verbal communication experience reveals the "comprehensive, related character of truth."¹⁰⁰ Man, as a finite creature, can hold only a limited grasp of Truth, about himself and his world. The testing of each man's perception of the whole and of the

⁹⁹Ibid., p. 121.

¹⁰⁰Ibid.

specific against another's perception calls forth the meanings and resources of each. "The truth of each needs to be brought into relations with the truth of others in order that the full dimension of the truth each has may be made known."¹⁰¹ To the extent that therapeutic non-verbal communication experiences elicit new truth from the participants, each may gain new understanding of his own limited grasp and new appreciation that another also has contributions to make to the Truth.

The possibilities for therapeutic non-verbal experiences are many, but are to be understood as part of the whole communication process. It is the writer's hypothesis that such experiences add new dimensions to therapeutic communication.

¹⁰¹Ibid.

CHAPTER III

THE KERYGMA AND THE THERAPEUTIC PROCESS

The Analogy of Faith

After developing the concept of therapeutic non-verbal communication in the previous chapter, the natural temptation is to look at Jesus as a therapeutic communicator, and at the church as a therapeutic group. To yield to this temptation would be to put the proverbial cart before the horse. Instead of looking at how a concept of therapeutic non-verbal communication illumines the Christian kerygma, it would be more appropriate and beneficial to see how the Christian kerygma illumines and clarifies the process of therapeutic communication.

The two directions of looking are called the "analogy of faith" and "analogy of being." In Kerygma and Counseling Thomas Oden has decried the fact that most analogies between psychotherapy and theology have been made by "analogy of being." Although therapeutic communication is not exactly the same case as psychotherapy, the same point is well taken. Oden states:

Typically, whenever analogies have been proposed between psychotherapy and theology, they have read from therapeutic experience to certain theological categories, i.e., on the basis of natural analogy attempting to derive certain theological learnings from a knowledge of psychotherapy. Up to this point, little attention has been given to turning

the analogy around to ask what we can learn about therapy from the self-disclosure of God.¹

Although the author has not found any previous analogies between therapeutic communication and theology, this chapter will consciously attempt to work from the analogy of faith to learn what we can learn about non-verbal therapeutic communication from the self-disclosure of God in Jesus and the early church.

The analogy of faith, unlike the analogy of being, "begins instead with God's action as it is received in faith, and views the natural relationship from the vantage point of divine activity."² For instance, we know what genuine fatherly love is because we have been loved by God the Father. This statement is made instead of saying that we know how a good human father loves his child so we have some knowledge of the fatherhood of God. The analogy of faith, in the first instance, can be seen only through eyes of faith. The analogy of being, in the second instance, "intends to be visible to the natural eye of rational analysis."³

This chapter will present some affirmations of God's action in revealing himself to man, as it is received in

¹Thomas C. Oden, Kerygma and Counseling (Philadelphia: Westminster Press, 1966), p. 47.

²Ibid., p. 48, italics omitted.

³Ibid.

faith. Although there will be several affirmations, each distinct in intent, they are each part of the whole activity of God. This action in its entirety is the kerygma.

A literal translation of kerygma is "proclamation" or "preaching."⁴ This is distinguished from teaching, didachē, which is more of a communication of ideas and concepts. Kerygma is the proclamation of, and announcement of, an event, and for our purposes it is the event of God's revelation of himself in the historical Jesus and in the Christ of faith. Oden states:

The Christian kerygma thus points toward an occurrence, the Christ event, by which faith understands itself to have been grasped by the therapeia (attentive, caring, intimate skilled service) of God himself.⁵

Kerygma communicates the presence of the divine in the midst of our history, both ancient and present, as a savior.

Therapeia literally translated means "service," "serving" and "care."⁶ In the case of medical usage, it

⁴William F. Arndt and F. Wilbur Gingrich, A Greek-English Lexicon of the New Testament (Chicago: University of Chicago Press, 1957), p. 432.

⁵Oden, op. cit., p. 151, parenthetical material added.

⁶Arndt and Gingrich, op. cit., p. 359.

means "treatment of the sick" or "healing."⁷ The therapōn is a servant⁸ who renders "careful, experienced, watchful, meticulous, skilled, obedient painstaking service to the one to whom he is intimately responsible."⁹ It is interesting to note that our modern word "therapist" is one who renders the careful, experienced, watchful, etc., service and care to the needs of the counselee.

In the New Testament, the great archetype of the therapōn is Jesus Christ, for here is God's intimate, reconciling, healing service to humanity. "God himself is the therapōn, according to the kerygma."¹⁰

Kerygma and therapeia are complementary. The kerygma proclaims the source of the therapy as God. Oden makes a good analogy:

Therapeia without kerygma would be like an unannounced wedding feast, the election of a President which never made the newspapers, a world record established but never reported by television, a great plague conquered but the name of the wonder drug never announced.¹¹

The kerygma is a proclamation about God. It is his "effector apparatus," to use the terms of communication theory. The kerygma is a message of therapeia codified into action language. O. A. Piper states:

⁷Ibid. ⁸Ibid.

⁹Oden, op. cit., p. 147.

¹⁰Ibid., p. 150.

¹¹Ibid., p. 152.

The specific mode of communication implied in . . . (the good news) is best brought to light by the two synonyms κηρύσσειν and κήρυγμα, and by the interchangeable use of κήρυγμα . . . and "gospel." The person who proclaims the good news does not act on his own authority. He is a herald . . . of the superior who sends him--i.e., of God, or his messenger--and announces what he has been commissioned to say. What he proclaims, however, is God's word, which in the Bible is not a manifestation of the "background" or the "secret" of things other than God, but invariably an expression of God's will or purpose. It is, therefore, addressed to the hearer's very self, not to his understanding or aspirations only, and thus concerns him in his personal totality of body and mind.

God's speaking is, therefore, the first act in the realization of a divine plan. Consequently, its truthfulness cannot be checked by the hearer by means of criteria which he has at his disposal, as is the case with scientific or philosophical notions and ideas. Rather, God's word authenticates itself by bringing about things about whose realization it speaks . . . This is not done by a miraculous power which the herald or the evangelizer possesses, nor by a kind of mana inherent in the words of a prophecy, but rather by the fact that, by speaking the word, God indicates that he is about to carry out the intention intimated in his word. Accordingly, the divine work promised can be considered as completed, once the revealing word has been spoken, though a wide temporal interval separates its inception from the ultimate goal.¹²

Again, returning to the language of communication theory, the kerygma is a message sent by God in an action language which may be verbalized and received by man where it is interpreted into life. The validity of the message is determined by the response of faith and obedience on the part of the receiver.

¹²O. A. Piper, "Gospel," The Interpreter's Dictionary of the Bible (New York: Abingdon Press, 1962), II, 443.

Bultmann, in his famous essay "The New Testament and Mythology" states:

The agent of God's presence and activity, the mediator of his reconciliation of the world unto himself, is a real figure of history. Similarly the word of God is not some mysterious oracle, but a sober, factual account of a human life, of Jesus of Nazareth, possessing saving efficacy for man. Of course the kerygma may be regarded as part of the story of man's spiritual evolution and used as a basis for a tenable Weltanschauung. Yet, this proclamation claims to be the eschatological word of God.

The apostles who proclaim the word may be regarded merely as figures of past history, and the Church as a sociological and historical phenomenon, part of the history of man's spiritual evolution. Yet both are eschatological phenomena and eschatological events.

All these assertions are an offence . . . , which will not be removed by philosophical discussion, but only by faith and obedience. All these are phenomena subject to historical, sociological and psychological observation, yet for faith they are all of them eschatological phenomena.¹³

After this brief introduction to the analogy of faith approach, and the kerygma, let us now turn to five specific affirmations which are the content of the kerygma.¹⁴ Each of these affirmations is a statement of God's activity. Their totality is the kerygma.

Incarnation and Empathetic Understanding

Incarnation is a fundamental affirmation of Christianity. The manner of incarnation, the time of

¹³Rudolf Bultmann, "The New Testament and Mythology" In Hans Werner Bartsch (ed.), Kerygma and Myth, A Theological Debate (New York: Harper & Row, 1961), p. 44.

¹⁴This five part division of the kerygma is suggested by Oden, op. cit., pp. 49-82.

incarnation, and the full significance of incarnation are all subject to debate, even among the biblical writers. But the fact of incarnation is a statement of faith.

Christian worship celebrates the God who has chosen to enter our human frame of reference, to participate in our troubled condition, and to affirm human existence by sharing in it in all its radical contingency, suffering and death.¹⁵

Man is able to affirm his own humanity because God has affirmed it himself.

The Gospel of Mark gives prominence to Jesus' divine sonship. At the Baptism, as Mark relates it, Jesus came up from the water and God's spirit descended upon him in the form of a dove; and it was Jesus himself who saw this event. In Mark 1:11 this personal announcement was made to Jesus, "Thou art my beloved Son; with thee I am well pleased." This intensely personal statement was unknown to those around Jesus. McCasland notes: "Neither the prophet John nor the people were aware of the drama in the soul of Jesus."¹⁶

Mark sees the incarnation as God's action to conquer the historical struggle between the good and evil.¹⁷

¹⁵Ibid., p. 50.

¹⁶S. Vernon McCasland, The Pioneer of our Faith (New York: McGraw-Hill, 1964), p. 15.

¹⁷Based on an unrecorded discussion with Dr. Eric Titus on December 11, 1968.

This struggle between the two opposing forces had previously been on a cosmic plane, but in the incarnation, God has entered the historical. God in the Jesus of history and the Christ of faith has continued to enter this battle. In all of Jesus' healings there is victory by God on the historical level.

Mark's statements of basic Christology are incorporated into the Christological formulations of Matthew and Luke. There are distinctive Matthean and Lukan features to this formulation: Matthew stresses Jesus' kingship; Luke stresses Jesus' humanity. Both Matthew and Luke exalt Jesus as the one who will establish the kingdom of God, which refers to the divine, redemptive activity of God in which Jesus is the central participant.

The Gospel of John needs to be studied in relation to the duality of "earthly" and "heavenly."¹⁸ Both the Jews and the family and friends of Jesus continue to see him as the earthly "son of Joseph" throughout the Fourth Gospel. It is necessary to recognize that there is a completely historical level which moves throughout the Gospel.¹⁹ Holding this historical picture of Jesus in mind for perspective, there is also the heavenly level

¹⁸Eric L. Titus, The Message of the Fourth Gospel (New York: Abingdon Press, 1957), p. 51.

¹⁹Ibid., p. 52.

which deals with God's concern for the salvation of mankind. Titus states:

As we take our stand here we see God sending forth his Spirit into the world so that he might take up his abode in human life. But, being in Jesus of Nazareth, he never ceases to be the divine being who was with the Father.²⁰

The incarnation is the work of God started in the human life of Jesus. Jesus had human life with a plus. Filson suggests that the early church expressed this difference in three ways.²¹ First, early in the history of the church there was testimony that the beginning of Jesus' life on earth was started in the miraculous action of God in the Virgin birth. Filson adds,

Whether the doctrine of the Virgin Birth is taken as literal fact, and Jesus had no human father, or whether it expresses in poetic form the deep theological fact that the coming of this unique life into history was the direct result of the purposeful act of God, it is clear that the church had to say that God was back of this birth.²²

Second, the church soon affirmed that Jesus was not guilty of personal sin (Acts 3:14, I Peter 2:22, II Cor. 5:21). More than just negatively guiltless, Jesus was positively obedient to God's will. "This was not what humanity was

²⁰Ibid., pp. 52-53. Italics of last sentence omitted.

²¹Floyd V. Filson, Jesus Christ, the Risen Lord (New York: Abingdon Press, 1956), p. 135.

²²Ibid.

like in others, but it was what humanity should be."²³

The third difference or plus in Jesus' life was what the church came to see him as a "new start for humanity, a new leader who gives to all of his people a share in a renewed human race."²⁴

The feelings of the early Christians towards God's work in Jesus are reflected in the titles given to him. After a thorough study of the names ascribed to Jesus by the biblical writers, Taylor concludes:

The dominating impression we receive from a close study of the names and titles of Jesus is that of their number, variety and Christological importance. In all, some fifty-five names have been examined; and while about twenty of them may be said to have had a temporary vogue, the rest have established themselves in the Christian vocabulary and are in constant use down to the present day.²⁵

The titles used to express the work and nature of Jesus again all point to the uniqueness which the early Christians sensed in Jesus. This plus in Jesus was the indwelling of the Holy Spirit, God incarnate.

Oden makes the following analogy of faith. The incarnation is an act of God in which he assumes our frame of reference, "entering into our human situation of finitude and estrangement, sharing our human condition even

²³Ibid., p. 136. ²⁴Ibid.

²⁵Vincent Taylor, The Names of Jesus (New York: St. Martin's Press, 1953), p. 169.

unto death."²⁶ This is comparable to empathetic understanding on the part of the counselor to the counselee in which one person places himself "in the frame of reference of another, perceiving the world as he perceives it, sharing his world with him."²⁷ Oden states:

When the troubled person finds himself under the care of a therapist with genuine empathy, i.e., with someone who truly seems able to share his perceptual framework, he experiences a profoundly liberating feeling of being known, being understood. Empathy is the precondition of all therapeutic effectiveness. Self-awareness, self-acceptance, and self-direction are all blocked without the experiencing of empathy.²⁸

The center of this analogy is the empathetic act of God to enter the human frame of reference with all its finitude, estrangement, and alienation. It is comparable to the therapeutic relationship in which one person enters the frame of reference of another to share in his depths.

Oden notes that this analogy of faith breaks down in two important ways.²⁹ First, the understanding of one person for another can never be divine understanding. And second, the kerygma proclaims that God not only shares in the human predicament, he takes on himself our estrangement. One person cannot presume to take any other person's sin and estrangement on himself. "The therapist only proposes to help the individual understand himself amid

²⁶Oden, op. cit., p. 50. ²⁷Ibid.

²⁸Ibid. ²⁹Ibid., p. 55.

his suffering, not suffer for him."³⁰

To state positively the analogy again, God, in the incarnation, has empathetically entered into the human frame of reference where man knows that he was known. The incarnation has a freeing, liberating effect on man. In the process of therapy, one individual enters the frame of reference of another in which there is also the experience of being known and understood. The empathetic act of God and man to another man brings increased self-understanding.

Divine Congruence and Congruence

The second affirmation of the kerygma is that God does not lose identity as God in the incarnation. This is what Oden calls the "divine congruence."³¹

Although God participated in the world which is finite and shared humanity, he did not lose his identity as God: he remained divine. The church fathers in the fifth century struggled with this thorny theological problem and came away with the Definition of Chalcedon:

Following then, the holy fathers, we unite in teaching all men to confess the one and only Son, our Lord Jesus Christ. The selfsame one is perfect (teleion) both in deity (theotēti) and also in human-ness (anthropotete); this selfsame one is also actually (alēthōs) God and actually man, with a rational soul (psychēs logikēs) and a body. He is of the same reality as God (homooousion tō patri) as far as his deity is concerned and of the same reality as we are ourselves (homooousion hēmin) as far as his human-ness

³⁰Ibid., p. 56.

³¹Ibid.

is concerned; thus like us in all respects, sin only excepted. . . .³²

The formulation in the Definition of Chalcedon attempted to clarify the dual nature of God/Christ as both divine and human without loss of either attribute. The definition discouraged the several over-emphases on Jesus Christ as divine or on Jesus Christ as human.

The biblical witness to God's congruence can be seen in the synoptic gospels' accounts of the crucifixion. Mark reports Jesus to have cried with a loud voice (shout): "My God, my God, why hast thou forsaken me?" (Mark 15:34). Matthew reports Jesus' thirst (Matthew 27:48). The humanity of Jesus is clear in these very human statements. The emphasis of the synoptics is balanced in John in his account of the crucifixion, there is "glorification" rather than suffering. John has pictured the indwelling of the Spirit in Jesus as the incarnate logos which is God's redemptive salutary act. The work of redemption will only be complete when the life-giving stream of the spirit is poured into the world. Titus states of John 19:30:

In terms of the total dramatic structure of the Gospel vs. 30 is of great importance. In truly Johannine style the words "It is finished" are ambiguous. They mean, on the one hand, his career has now ended, he is about to die (this is what the onlooker would grasp). On the other hand, the words signify

³²John H. Leith (ed.), Creeds of the Churches (Garden City, N.Y.: Doubleday, 1963), pp. 35-36.

the completion of the work of redemption which is accomplished in the cross. And since this redemption is due to the giving of the Spirit, the bowing of the head is paralleled by the giving up of the Spirit.³³

The faith statement of Divine Congruence is also seen in the trinitarian formulas. God, in his tripartate form of Father, Son, and Holy Spirit, is and remains God. God continues to be God in his creative activity as the Father. He continues to be God in his empathetic activity as the Son when he participates in the human predicament. He continues to be God in his continuing revelatory work as the Holy Spirit. Karl Barth states:

It is one God, of whom the three articles of the Confession speak. These are not three Gods, a God split and separated in Himself. The Trinity does not speak of three Gods, but of the Trinity--that is how the Christian Church has always understood it and could find it in no other form in Scripture--that speaks once again, and with all the more emphasis, of the one, single God. This is no sort of theoretical business. But everything depends on the fact that the content of the three articles cannot be separated from each other, that in all that is said in these three articles about God the Creator and God in his action in Jesus Christ and in His operation as the Holy Spirit, it is not a matter of three divine departments, with a "Director" for each. What is involved is the one work of the One God, but the one work that is moved within itself.³⁴

Divine Congruence can be defined, then, as fact that God does not stop being God even in his participation in humanity.

³³Titus, op. cit., p. 231.

³⁴Karl Barth, Dogmatics in Outline (New York: Harper & Brothers, 1959), p. 42.

Oden makes the analogy of faith with therapy: "Even as God participates in our estrangement without being estranged from himself, likewise the therapist participates in the estrangement of the client without losing his self-identity."³⁵

A good therapist remains himself with his own feelings, his own experience, his own identity even in the midst of his empathetic journey with his counselee.

In the midst of feelings of hostility anxiety, guilt, and value negations of all sorts, the congruent therapist does not cease to be a one with himself, reconciled with his own feelings, hiding nothing from himself, engaging in no self-deception or evasion of his own feelings.³⁶

There is a distinct line between empathy and congruence. The therapist, empathizing with the neurotic, does not become a neurotic himself. God, empathizing with estranged man, does not become estranged himself.

In participation with a congruent being, God or therapist, there is a new possibility for man to affirm himself as himself. There is a new possibility for the realization of the self as a unique being. There is a new possibility for self-identity as over against the other. There is a new possibility for entering a I-Thou relationship in which there is real awareness of I. After stating

³⁵Oden, op. cit., p. 57, italics omitted.

³⁶Ibid.

strongly that a therapist must be involved with his patient (empathy), Glasser emphasizes that the therapist must remain responsible for himself (congruent).

The therapist must be a very responsible person--tough, interested, human, and sensitive. He must be able to fulfill his own needs and must be willing to discuss some of his own struggles so that the patient can see that acting responsibly is possible though sometimes difficult . . . He must have the strength to become involved, to have his values tested by the patient, and to withstand intense criticism by the person he is trying to help . . . Willing to admit that, like the patient, he is far from perfect, the therapist must nevertheless show that a person can act responsibly even if it takes great effort.³⁷

As with the first section of our analogy of faith, no human being will be totally responsible, will remain totally congruent. Human congruence will never be divine congruence.

In addition human self-awareness will never be divine self-awareness. Yet to the extent that congruence elicits the response of self-identity and greater awareness of the beingness of self, it is analogical to the absolute existence of God as God and the consequent human awareness of self.

Forgiveness and Acceptance

The third part of the kerygma, as seen by Oden, is forgiveness. He says:

³⁷William Glasser, Reality Therapy (New York: Harper & Row, 1965), p. 32.

Forgiveness means that God accepts us radically. We are called to accept our acceptance, despite our feelings of inacceptability. Divine forgiveness does not mean that our phoney human existence is somehow magically changed into utopia, but to the contrary that we are accepted amid our phoniness! Nor does it mean that the accepting reality affirms our sham and pretence, but that we are affirmed in spite of our sham and pretense.³⁸

Emerson in his study, The Dynamics of Forgiveness, makes the point that forgiveness is not just a synonym for "acceptance," "freedom," "release," or "atonement"; rather, forgiveness is a dynamic itself which makes it possible to accept or atone.³⁹ There are two results of forgiveness. First, forgiveness which is realized allows one to be free. "This freedom may be expressed as freedom from guilt, freedom to love, or freedom just to wait and see what must be done. Any way it is expressed, it is freedom."⁴⁰ The second result of forgiveness is in an instrumentality.⁴¹ The instrumentality may be any of a number of things: AA for the alcoholic, the church in its confession, worship, cell groups, preaching and the sacrament. "This is to say that when the dynamics of forgiveness are taken seriously, the so-called 'means of grace'

³⁸Oden, op. cit., p. 62.

³⁹James G. Emerson, Jr., The Dynamics of Forgiveness (Philadelphia: Westminster Press, 1966), p. 72.

⁴⁰Ibid.

⁴¹Ibid.

literally becomes means of grace. Otherwise they are just forms."⁴²

W. A. Quanbeck in his article on Forgiveness in the Interpreter's Dictionary of the Bible says that the most significant contribution of Jesus was in his relations of forgiveness to his own person and mission.⁴³ Jesus understood his mission to forgive persons and, in the forgiveness, to restore health. He sees his forgiveness as complete, and the only unforgiveable sin of man is to deny the work of the spirit in forgiveness. ". . . Whoever blasphemes against the Holy Spirit never has forgiveness, but is guilty of eternal sin" (Mark 3:29).

The conditions for forgiveness are repentance and faith. Quanbeck notes:

Repentance and faith remain conditions of forgiveness. They are related to the covenant, the new covenant established by the Messiah. But where Jesus uses the language of forgiveness even though he seems to find it inadequate, the apostolic church coins new vocabulary to espound the meaning of the new covenant. Paul speaks seldom of forgiveness of sins but often of being ἐν Χριστῷ. The man of the new age is in Christ . . .⁴⁴

Forgiveness is the release of guilt, "the deliverance from anxiety and a burdened conscience, and recovery

⁴²Ibid.

⁴³W. A. Quanbeck, "Forgiveness," Interpreter's Dictionary of the Bible (New York: Abingdon Press, 1962), II, 318.

⁴⁴Ibid., p. 319.

of peace with God"⁴⁵ in those situations where sin is expressed as guilt. Forgiveness is reconciliation, reunion, and relationship where sin is thought of as extrangement and rebellion. Divine love accepts and forgives man in his rebellion, in his separation, in his feelings of grandiosity. And in this acceptance and forgiveness, man is presented with new opportunities for self acceptance.

One of the most poetic statements of forgiveness comes from Tillich in his sermon "You are Accepted." He writes:

Sometimes . . . a wave of light breaks into our darkness, and it is as though a voice were saying: "You are accepted. You are accepted, accepted by that which is greater than you, and the name of which you do not know. Do not ask for that name now; perhaps you will find it later. Do not try to do anything now; perhaps later you will do much. Do not seek for anything; do not perform anything; do not intend anything. Simply accept the fact that you are accepted!"⁴⁶

The kerygma announces that God accepts his creation, even in its incompleteness. It follows logically, that if God accepts his creation, then man too can accept the givenness of creation. Oden carries this one step further:

It is because God has made his acceptance known in an event that we are now finally freed to acknowledge

⁴⁵Ibid.

⁴⁶Paul Tillich, The Shaking of the Foundations (New York: Charles Scribner's Sons, 1948), p. 162.

that nothing in creation is unclean in itself. Such an attitude is not a mere projection or a humanistic affirmation, but a response to nothing less than God's own self-disclosure.⁴⁷

It is at this point that the analogy of faith is made between the kerygmatic forgiveness and the therapeutic process. The therapist accepts, without judgment, the unacceptable feelings, the inconsistencies, the overt and covert sin of man. The acceptance of the person is the affirmation of his personhood amid his alienation and in spite of his failings. "Just as the precondition of self-understanding is being understood, the precondition of self-acceptance is genuinely being accepted."⁴⁸

With an increasing ability to accept the self, there is also an increased capacity to view the actions of the self with realistic self-criticism and make judgments about the appropriateness of various actions. Glasser, in describing the qualities of a good therapist, states:

The therapist must have knowledge and understanding about the person who is isolated or different because he cannot properly fulfill his needs. The therapist must accept him as he is first. An important distinguishing trait of a good therapist is his ability to accept patients uncritically and understand their behavior . . . The patient, recognizing a man who accepts, understands, and is not frightened, moves rapidly toward involvement.⁴⁹

⁴⁷Oden, op. cit., p. 63.

⁴⁸Ibid.

⁴⁹Glasser, op. cit., p. 23.

The paradox is evident. The person, as he experiences both divine and human forgiveness, is able to view himself with a new reality and to see his alienation in a new light. At the same time, as the person becomes more comfortable with himself, he also can become more aware of the possibilities which are open to him for growth and change. Oden writes:

Such a paradoxical dialectic may be viewed under the analogy of the kerygmatic affirmation that we are loved by God as sinners, and that repentance and faith are two sides of the same coin. In the language of the Christian community, fallen creation is understood as redeemed in its fallenness . . . at once justified and sinful, and accepted precisely amid its sinfulness. The process of destruction of idolatries thus proceeds simultaneously with the rebuilding of the foundations of the authentic self.⁵⁰

The analogy of faith between divine forgiveness and the forgiveness of a therapeutic individual is, obviously, limited. The finite acceptance of a human being can never be fully equated with the forgiveness of God. Nevertheless, the kerygmatic affirmation of forgiveness has an analogic counterpart in the relationship between therapist and counselee.

Grace and Permissiveness

The fourth affirmation of the kerygma is of God's grace. Grace may be defined as "God's unmerited free,

⁵⁰Oden, op. cit., p. 65.

spontaneous, love for sinful man, revealed and made effective in Jesus Christ."⁵¹

Grace is the central theme of the gospels. Humanity had a need and God responded to this need in the incarnation. The grace of God in Jesus was a response to need, and not the merit of humanity. Jesus himself ministered to the outcasts and sinners and verbalized that his gracious mission was to the undeserving.

The parables of Jesus often reflect the gracious relationship between God and man. The Prodigal Son (Luke 15:11-24) is welcomed by the father in spite of his rebellion and worthlessness. The Parable of the Householder and Vineyard workers (Matthew 20:1-16) shows a generous dealing with man which is far greater than human justice would require. The need and not the merit is the basis for the householder's dealings. Jesus' teaching speaks over and over of God's relationship with man in which God gives to man according to need and not merit.

Paul sees the Christ event, both in the incarnation and in the crucifixion and resurrection, as the grace of God. The incarnation was an extreme act of Grace: "For you know the grace of our Lord Jesus Christ, that though he was rich, yet for your sake he became poor, so that by

⁵¹C. L. Mitton, "Grace," Interpretors Dictionary of the Bible (New York: Abingdon Press, 1962), II, 463.

his poverty you might become rich" (II Corinthians 8:9). Again in Romans 5:6-11, Paul stresses the point that "God shows his love for us in that while we were yet sinners, Christ died for us."

Grace gives freedom. Oden writes

Under the conditions of grace, the individual learns to actualize his freedom, as it were, within the context of the safety of divine accepting love. The individual experiences a profound sense of divine permission to be who he is.⁵²

In addition to this divine affirmation of the self the act of God is to reach through to give help within the fallen situation. Not only is Jesus Christ the act of God, but he is also the way-shower out of the fallen condition. The way is through obedience and faith.

The analogy of divine grace with the role of the therapeutic person can be seen in two ways. First, the therapist creates a "permissive" atmosphere in which an individual can experience "the exercise of his emerging freedom under safe conditions."⁵³

Under the conditions of a permissive setting, the individual can perceive himself amid his inconsistencies (enabled by the counselor's empathy), accept those inconsistencies (since he perceives them as acceptable to the therapist), and begin experimentally to exercise his freedom to move toward self-chosen goals. He learns to trust his organism to carry him toward his actual intention.⁵⁴

⁵²Oden, op. cit., p. 68.

⁵³Ibid., p. 67.

⁵⁴Ibid.

The second aspect of the permissive atmosphere is the help which the therapist may give by acting as a midwife for the emerging sense of self-direction and self-responsibility. There is real need for help here. Oden notes: "However we may rightly emphasize the irrepressible tendency of the organism toward self-actualization, the neurotic individual needs help in order for him to actualize this original capacity."⁵⁵

Oden then states the analogy concisely:

The fourth analogical dimension is the similarity, despite all other dissimilarities, between the grace of God which permits us to be who we are, calling us to self-direction under this permission, and the permission of the therapist who places the distraught person in a setting that enables and calls him to discover himself, feel his feelings, and move toward self-direction.⁵⁶

Again, it should be clear that there is a rather imperfect analogy here. The grace of God and therapeutic permissiveness are not the same. God's grace is continuing, constantly renewing, perfect in permission to be, and eternally given. Although a human being in a fleeting moment may participate in this eternal event, his activity and participation is bound by time and space; and most likely limited to a particular point in history.

⁵⁵Ibid., pp. 67-68.

⁵⁶Ibid., p. 68, itallics omitted.

Divine Love and Unconditional Positive Regard

The fifth dimension of the Christian kerygma as seen by Oden is divine love. The agapē of God toward man is more than a feeling of acceptance; it is the powerful vehicle which requires response on the part of man when felt. We love because God loves us first.

In summarizing the religious source of moral demands on man, Paul Tillich calls attention to importance of divine love.

. . . The religious source of the moral demands is love under the domination of its agapē quality, in unity with the imperative of justice to acknowledge every being with personal potential as a person, being guided by the divine-human wisdom embodied in the moral laws of the past, listening to the concrete situation, and acting courageously on the basis of these principles.⁵⁷

The fifth dimension of the analogy of faith and therapy is stated by Oden as:

. . . Even as God unconditionally loves the sinner in order to free him from the self-righteousness, anxiety, guilt, and defensiveness that prevent him from loving his neighbor, so in effective therapy does the client experience in some sense what appears to be a relationship of unconditional positive regard, which frees him to value others anew in the light of his new self valuation.⁵⁸

The perspective of faith, under which a person understands that he is loved allows the appropriate

⁵⁷Paul Tillich, Morality and Beyond (New York: Harper & Row, 1963), p. 46.

⁵⁸Oden, op. cit., p. 74.

responses in terms of behavior and attitude towards others. Understanding that he is loved, a person then can respond to others without threat to himself, he can temper his own actions and attitudes with the qualities of justice and mercy. As we learn from God's love the character of creative love, we are freed to love as we have been loved.

It is possible to see in the "therapeutic relationship a reflection and mediation of this divine love which is present in being itself . . . as the liberating ground of all human love."⁵⁹ Obviously, most therapeutic relationships are not "unconditional." The relationship may be modified by the context of time limitation and fees, as well as the therapist's own needs. To some extent there is unconditional positive regard which in itself may be the therapist's response to divine love.

Obviously, again, the analogy between divine love and unconditional positive regard cannot be pushed too far because of the finitude on the human side of the analogy.

As a finite being with certain needs of his own (conditions!), the therapist at best is only capable of making roughly transparent through the interpersonal relationship the truly unconditional positive regard rooted in reality itself.⁶⁰

Summary of the Analogy of Faith

The analogy of faith between the kerygma and therapy begins with a five-part affirmation of the kerygma's

⁵⁹Ibid.

⁶⁰Ibid., p. 75.

content. The kerygma consists of the incarnation, divine congruence, forgiveness, grace and love.

The incarnation is God's participation in a radical way in the human predicament in which God shares the human frame of reference. This is comparable to the therapist's assumption of his patient's frame of reference which we have called empathy and empathetic understanding. The recipient of divine empathy, the incarnation, feels known. The recipient of therapeutic empathy feels known. And in being known there is a new measure of self-understanding.

Divine congruence emphasizes that although God fully participated in the human frame of reference, he did not lose his identity as God. God in the Christ event does not cease being the Divine Sovereign, God the Father and God the Spirit. This is comparable to the therapist's congruence in which he does not lose his own integrity; he maintains and is responsible for his own feeling and actions even in the midst of participation with the counselee. Divine congruence calls for the response of an individual being who is himself distinct and unique. Therapeutic congruence also brings awareness of personal being. In understanding the uniqueness of individual being there is new self-identity.

Forgiveness proclaims that God accepts us as limited, finite, imperfect, and human. By being acceptable,

in spite of inadequacies, there is a growing measure of self-acceptance, a release of guilt, and the possibility of dropping defenses. Divine forgiveness is comparable to therapeutic acceptance in which the therapist by accepting the counselee with all his inadequacies, helps the counselee to accept himself. Divine forgiveness allows the release of feelings of guilt and separation. Therapeutic acceptance engenders self-acceptance.

Grace is the proclamation that God has given unmerited, free, spontaneous love beyond what is deserved. Therapeutic permissiveness, the analogical counterpart, allows the counselee freedom to express and help in actualizing his innate potentials. Therapeutic permissiveness and God's grace give freedom and encourage self-direction.

The kerygmatic proclamation of God's love is that God enters a caring, serving relationship with man which increases his capacity to enter a caring, serving relationship with others. This is comparable to unconditional positive regard in the therapeutic setting where the counselee moves towards responsible, caring, serving, relationships with other men. Both God's love and unconditional positive regard elicit a "loving response." Both give a freedom to act on the behalf of others.

Oden makes a tabular summary of the analogical relationships between kerygma and the therapeutic relationship.⁶¹

	Therapist's Activity	Healing Process	Christ Event	Believer's Response
Understanding (Cognitive)	Empathetic understanding	Self-understanding	Humanity of God	Being known
Existing (Ontic)	Congruence	Self-identity	Deity of God	Being oneself
Feeling (Emotive)	Acceptance	Self-acceptance	Forgiveness of God	Being forgiven
Willing (Volitional)	Permissiveness	Self-direction	Grace of God	Being liberated
Acting (Relational)	Unconditional positive regard	Freedom for others	Love of God	Loving others

The analogy, starting with the specific affirmations of the Christian kerygma and the therapeutic process as originally presented by Oden and developed in this chapter, is to the author a firm theological basis for pastoral counseling, especially the client-centered model of Rogers

⁶¹Ibid., p. 80.

The Therapeutic Communicator as a Kerygmatic Agent

The categories of the therapist's activity which were postulated in the preceding discussion as analogous to God's activity in the Christ Event do not have exact correspondence to the categories in which the therapeutic communicator was described in Chapter II.

Perhaps the most constructive way to proceed is to modify Oden's table which shows the analogy between God's activity and the therapist's activity. The modification will be to organize the therapist's activity in corresponding categories of the therapeutic communicator's activity.

Therapeutic Communicator's Activity	Therapist's Activity	God's Activity
Authenticity		
-responds with whole being to another	Empathetic understanding	Incarnation
-knows dependence on others	Unconditional positive regard (UPR)	--
-knows independence	Congruence	Divine congruence
Openness		
-to reveal self to others	Empathetic understanding Congruence	Incarnation Divine congruence
-to receive others' self-revelation	Empathetic understanding Acceptance Permissive	Incarnation Forgiveness Grace
-to meaning and influence of communication on self	UPR	Love
Discipline		
-to give self in	Empathetic understanding	Incarnation

Therapeutic Communicator's Activity	Therapist's Activity	God's Activity
Discipline (Cont'd.) communication	ing Congruence	Incarnation Divine con- gruence
-to give freedom to others for response	Permissive Acceptance UPR	Grace Forgiveness Love
Relatedness -to maintain rela- tionship	Empathetic understand- ing UPR	Incarnation Love

The quality of authenticity is seen in the total response of one person to another person, knowing both dependence on him and independence from him. It is analogous to the therapist's activity of empathetic understanding whereby one person places himself in the frame of reference of another. It also includes some of the quality of unconditional positive regard which is the reaching out in active affirmation for another in a positive act of love. Authenticity includes the act of knowing one's self as person, being independent and retaining self-identity.

God's action in the incarnation, as we have seen, is a radical response to others. And the fact of Divine

Congruence maintains God's independence from man. It would be rather grandiose to postulate that God was, in any way, dependent on man for existence. So in this case there is no analogy between therapeutic communication and God's activity.

The act of openness in the revelation of oneself to others includes both empathetic understanding and congruence. In God's action this is both incarnation and divine congruence. There are several synonyms for divine openness to others: "becomes fully of, is attuned to, abandons himself in, is caught up in, is immersed in, shares or participates in, responds to, forgets himself in, is absorbed by, blends himself with . . ." ⁶² These incarnational synonyms speak of God's revelation of himself, his openness to reveal himself to man. The other half of this coin is a strong sense of "self" to reveal, or congruence. The therapeutic person, the therapist, and God do not lose their identity in openness.

Openness is also the ability to receive the revelation of self as given by others. God's action in the incarnation is a way of receiving the human frame of reference, to participate in the world. And in receipt, there is both forgiveness, that is acceptance of the

⁶²Ibid., p. 54.

world and man as it is; and grace, the giving of unmerited, spontaneous love to the world.

In addition to the giving of self and the receipt of other selves openness includes the ability to find meaning and influence in the course of the relationship. The communication itself has meaning in the form of content. Openness to the meaning allows for the altering of opinions and actions. Unconditional positive regard and its analog Love require a response in the form of change--there is freedom to act for others because of the meaning in the communication.

The discipline of communication is to give oneself in the communication, to speak the word which needs to be spoken and to act the act which needs to be acted. God in the incarnation spoke the Word and acted the Act which needed to be spoken and acted. And in doing so he not only retained his identity, but also gave freedom to others by his forgiveness. This is the second discipline of therapeutic communication. The freedom of response can be seen in the forgiveness of God which allows man to accept his offering (response) as acceptable. It can also be seen in God's grace which is given on the basis of need, not merit; so man does not run into the predicament of having to earn God's love. God's grace encourages self-direction and individual response. And finally, God's

love opens the way for free response to others, not as requirement, but as a desire.

The therapeutic communicator is related. This, as has been said, means the maintenance of relationship between beings interdependent beings. The thorny theological problem of whether there is interdependence of God and man need not be answered here. God's grace as seen in the incarnation speaks of his action to maintain relationship with the human being. The nature of Divine Love is to call forth the human desire to establish and maintain relationship.

Summary

Although the correspondence is not one to one, the kerygmatic affirmations of God's activity can be traced through the activity of a therapist in Rogerian terms and roughly equated to the qualities we have set out as those of a therapeutic communicator.

By means of the analogy, approached from a faithful response to the kerygma, it is possible to discern God's revelation in therapeutic communication.

. . . If the self is understood, by definition, as unavoidably standing in relation to the One who gives it life, then understanding of oneself must in some sense be an understanding of that ultimate reality which is the ground and source of selfhood. This does not mean that self-understanding is synonymous with the divine self-disclosure, since revelation differs from insight in that the initiative for it comes from another. But the Other who speaks in authentic

insight is spoken of in the witness of the Christian community. Revelation is related to insight as speaking is to hearing, however inadequately the hearer may know of the nature of the reality speaking to him in his insight into himself.⁶³

⁶³Ibid., p. 82.

CHAPTER IV

THERAPEUTIC NON-VERBAL COMMUNICATION EXPERIENCES IN THE GROUP PROCESS

In Chapter II, the theory of therapeutic communication was developed. The therapeutic communicator was described in the words of Howe as being authentic, open, disciplined, and related.

Therapeutic communication was distinguished from communication in general in that the intent of the communicants is toward helping achieve an actualized life. The therapeutic non-verbal communication experience was defined as a programmatic device which has the intent to aid the therapeutic process.

In Chapter III an analogy was developed between the kerygmatic affirmations of God's action to give salvation to man and the work of the therapist in helping the counselee achieve his human potential. The analogy of faith postulated that the kerygmatic affirmations of Incarnation, Divine Congruence, Forgiveness, Grace, and God's Love have analogic counterparts in the therapeutic situation which are expressed by the Rogerian concepts of empathetic understand, congruence, acceptance, permissiveness, and unconditional positive regard. The analogy of faith breaks down in every case when the absolute actions

of God are compared to the finite actions of man. Nevertheless, the analogy of faith does open the possibility for identification of God's action in the therapeutic situation, even though different terms are used and God's action may never be so identified.

Chapter III also attempted to draw the qualities of therapeutic communication into the analogy, although there is no direct correspondence between the terms.

It is appropriate now to turn attention to the therapeutic group which makes use of the theory of therapeutic communication and uses programatic non-verbal therapeutic experiences to bring about change.

To accomplish this task, this chapter will be divided into three major divisions. The first will attempt to suggest a theoretical framework for the process of a therapeutic group. The second division will present an analogy between the categories of therapeutic communication experiences and the kerygma as developed in the preceding chapter. Finally, a brief presentation will be made of the use of therapeutic non-verbal communication experiences in the experimental pastoral counseling group.

The Process of a Therapeutic Group

It is necessary at the outset of this discussion to make a definitive distinction between a therapeutic group and non-therapeutic groups (although there may be

much therapy occurring in a non-therapeutic group). Clinebell makes a six point statement of the characteristics of a therapeutic group. They are:

- (1) The group has avowed therapeutic purpose which the members know in advance.
- (2) Its activities are limited to those which are directly psycho-therapeutic (although there may be post-sessions for informal socializing).
- (3) The dominant concern of the group is its members' growth in self-awareness, self-acceptance, and in their ability to form creative relationships.
- (4) Complete freedom of expression is encouraged and expected, including negative feelings about other members and the leader.
- (5) There is a continual and intensive focus on interaction within the group, on the premise that this reflects the members' general interpersonal patterns of relating.
- (6) Such groups are usually small, six to eight being a common size. Many such groups continue over several years.¹

Knowles adds to this list the "covenant nature of the group."² Such a covenant builds trust and facilitates trustful communication among the members. The trust is shown when each person knows that he will be listened to,

¹Howard J. Clinebell, Jr., Basic Types of Pastoral Counseling (New York: Abingdon Press, 1966), p. 210. This definition is an adaptation of a definition presented by George R. Bach, Intensive Group Psychotherapy (New York: Ronald Press, 1954).

²Joseph W. Knowles, Group Counseling (Englewood Cliffs: Prentice-Hall, 1964), p. 20.

this his presence is valued, and that he is cared for in his own right.

Stages of Group Life. No group is static; there is growth in the group life which comes as the members begin to realize their interdependence and become that dynamic whole which is the new entity of the group. The group develops a sense of cohesiveness which is a result of the interdependence of the members.

Knowles divides the stages of group life into five "developmental phases" which illustrate the movement from the beginning of the group life to the mature "fully functional" group.³ It is the author's experience that these stages do not necessarily occur in an orderly manner; there is, at times, a good deal of overlapping, and, at other times, a reoccurrence of stages.

The first developmental phase of group life is getting started.⁴ Included in the first phase is "anticipatory anxiety, leader dependence, and goal orientation."

Anticipatory anxiety about what the new group will be like is found in all participants. Usually, the first twenty minutes of the group meeting facilitate the expression of the fears which each person has. The fears of intimacy, of loss of individuality, of revelation of

³Ibid., p. 95.

⁴Ibid.

weaknesses, and of finding out something unknown about himself are all aspects of the anticipatory anxiety.

In the summary⁵ of the first session of the experimental group, BW, a 41 year old female, reported: "At the beginning I felt very strange, not knowing what to expect of all the strange people." As would be expected, all the reports of participants indicated anxiety. Such words as "tense," "nervous," "unsure of what to expect," "uneasy," and "apprehensive," were used to express the feelings at the beginning of the first meetings.

In the face of this anxiety, it is natural for the participants of the group to turn to the leader to give structure and relieve the painful anxiety. The whole problem of the therapist's role in the group will be discussed above. But the author feels that one function of the leader should be to give some structure to the first meeting, introducing the concept of group-centered leadership, while helping to alleviate the anticipatory anxiety.

Goal orientation is also part of the first phase of the group development. The goals of personal growth, the lack of dependence on the leadership for group decisions, the clarification of group procedures and rules,

⁵As mentioned in the introduction, each member of the group was given a form on which to report his involvement in the group session. Individuals will be identified by initials with necessary identifying information.

all help the participants to define goals.

The second phase of group development is sharing information.⁶ This includes both getting acquainted and testing out the group by sharing low-threat information with much projection onto others for one's particular plight. Knowles notes that such sharing "is an attempt to test out the group, to win sympathy and understanding for personal suffering and hurt, and to bring others into one's world as the informant perceives it."⁷ Bach calls this stage "associative compeering" in which there is both enjoyment of the peer relationships and what he calls the "peer court."⁸ In the "peer court" there is much advice-giving and diagnosis of what is wrong with one another. There is much "hot seating" and direct confrontation with the expected defensiveness on the part of the "victim" in these orally-aggressive sessions. Knowles notes:

While the peer court is in session, the counselor is limited to pointing out what the group is doing. His observations may not be heard. When the group declares the trial invalid, it is in a position to examine what has happened. The accused also emerges which new strength to take his place among his peers.⁹

The third phase of group development is sharing feelings.¹⁰ No longer are "ideas" the major topic of

⁶Knowles, op. cit., p. 96.

⁷Ibid.

⁸Bach, op. cit., p. 94.

⁹Knowles, op. cit., p. 97.

¹⁰Ibid.

discussion, but feelings themselves are expressed and shared. This does not mean that there have been no feelings expressed before this stage, but now feelings are consciously shared as self-revelation.

During this stage participants learn to trust each other with what is deeply important to them. "Participants sense that they are on 'holy ground' as one of them lifts the veil that separates the inner man from the external world."¹¹

A corollary of trust is the feeling of acceptance of that which has been unacceptable to the participant. Feelings about self inadequacy, revelations of past 'sinful' deeds, and all other painful feelings and deeds do not drive others away; rather the expression of these deeds and acts provides the basis for deep relationship. Knowles characterizes the unexpected response this way:

You are accepted. Having shared this, you have only revealed to us how human you are. We feel comfortable with you because you have let us know you. And in knowing you, you have helped us to know ourselves better. To tell the truth, we are very much like you.¹²

The fourth phase of group life development is confrontation and emotional encounter.¹³ After feelings of acceptance and identification of personal involvement within the group, then individual differences begin to be

¹¹Ibid.

¹²Ibid.

¹³Ibid., p. 98.

felt. In this phase subgroups form and there begins a process of disagreement and encounter between the subgroups.

The phase of confrontation and encounter

makes available emotionally corrective experience in the area of relationship and behavior that involves others. At this level, one gets a reading and evaluation as to how his behavior affects his contemporaries in and outside the group.¹⁴

Confrontation and emotional encounter serve to bring awareness to those areas which need change. Confrontation and emotional encounter go to the deepest levels of human existence; to the basic assumptions, and values, and beliefs of the person which determine action. Camilla Anderson has written that feelings are of little importance except as indications that there are basic assumptions beneath the feeling.¹⁵ She writes:

It is the assumption we are after, not the feelings. Not until we deal with the assumptions or beliefs or the values of a person have we actually reached the person. We cannot understand a person until we understand his beliefs, and a person has not changed until he has changed his beliefs.¹⁶

In this phase of group development, assumptions, values and beliefs are challenged.

¹⁴Ibid., p. 99.

¹⁵Camilla M. Anderson, "Guilt is Not the Problem" Pastoral Counselor (Fall 1964); mimeographed article, p. 5.

¹⁶Ibid.

The fifth phase of group development according to Knowles is the phase of member autonomy and group interdependence.¹⁷ In this phase, individuals experience their selfhood and yet feel part of the group. Knowles calls this "authentic selfhood-in-community."¹⁸ The group is the focus of reality testing, rightly having taken this function from the leader. Each member takes part in the therapeutic process with each other member. In this state, a participant has the ability to stand over against the other participants, to have his own ideas, to have his own feelings, and to take responsibility for his own actions. The group as a whole takes on the mature function of sensing problem behavior, determining unmet needs within the individual, and exploring alternative actions which would more appropriately fulfill the unfilled need.

The sense of personal autonomy and interdependence in the group is expressed as the "essential We" by Maurice Friedman in his discussion of values in the philosophy of Martin Buber. Friedman writes:

The relation between man and man takes place not only in the "I-Thou" relation of direct meeting, but also in the "We" of community. As the "primitive Thou" precedes the consciousness of individual separateness, whereas the "essential Thou" follows and grows out of this consciousness, so the "primitive We" precedes true individuality and independence, whereas the "essential We" only comes about when independent people have come together in essential relation and

¹⁷Knowles, op. cit., p. 102.

¹⁸Ibid.

directness. The essential We includes the Thou potentially, for "only men who are capable of truly saying Thou to one another can truly say We with one another."¹⁹

Let us now turn to the specific tasks of the group leader in the therapeutic group.

The Therapist's Role in Group Pastoral Counseling.

Clinebell, in a course entitled "Group Counseling and Therapy in the Local Church" outlined what he considered to be the role of a therapist in group pastoral counseling situations.²⁰

First, the group leader must help the group to become "group-centered" with group-centered leadership. Of group-centered leadership Clinebell writes:

The most crucial single factor in group health is the quality of its leadership. In an authority-centered group, honesty of communication tends not to occur. Members hide their real feelings and withhold themselves from wholehearted participation. The more a leader assumes responsibility for what happens in the group, the more the group forces him to carry the ball. In a leader-centered group, members give only enough of themselves to "get by." Uncreative conformity and its Siamese twin, "foot-dragging," flourish. Coercive devices such as penalties and rewards become increasingly necessary to keep the wheels turning.²¹

¹⁹Maurice Friedman, "Dialogue and the 'Essential We.'" The Basic Values in the Philosophy of Martin Buber, in Max Rosenbaum and Milton Berger (eds.), Group Psychotherapy and Group Function (New York: Basic Books, 1963), p. 610.

²⁰Howard J. Clinebell, Jr., a lecture delivered to the class on February 27, 1966, Course N11, "Group Counseling and Therapy in the Local Church." The discussion outline is based on the author's notes of this class.

²¹Howard J. Clinebell, Jr., Mental Health Through Christian Community (New York: Abingdon Press, 1965), p. 155.

Putting this into terms used in the previous chapters of this study, the group therapist is disciplined to give freedom for others to respond and he is open to receive the self-revelation of others.

Second, the therapist creates an accepting climate where people feel safe to expose themselves. The role is not one of judge or director in that there is no moralism nor hidden agendas. Rather, through openness to receive others, through authenticity in response to others, and through the discipline of freedom, an accepting climate is created.

Third, the therapist helps move the discussion to process and feeling rather than focusing on content. A defense against dealing with deep personal material is to become a player in the game of "intellectual ping-pong" in which the ball spends most of its time in the air, seldom landing on the table of life.

Fourth, the therapist encourages honesty and real communication. Where there is mixed communication, with the verbal and non-verbal messages being different, the therapist needs to call attention to the discrepancy and unravel the intended communication. Also, the therapist can act as a model for honest communication by being honest with his own feelings.

Fifth, the therapist should be aware of the group as a whole, calling attention to the group mood and to the

total direction of the group. This is not the same as creating the mood or directing the group. Knowles calls this function "the drawing of a 'communication map'."²² The therapist calls attention to the themes, clarifying the movement of interaction. Here non-verbal clues are immensely important. Position, movement, facial expression are all grist for the therapeutic mill. The therapist also can aid each member to make his contribution and can help to insure that each member's contribution is recognized.

Sixth, the therapist can help the group gain closure at the end of themes by drawing together the pieces into a summary.

Seventh, the therapist can offer interpretations when the group is on the verge of fresh insight. This is not the same as analytical interpretation which puts one person on the hot seat; rather it is a group-centered interpretation which helps shed light on the here-now interactions.

Eighth, the therapist can help the group become what Bach calls the "work group," and what Knowles calls the fifth phase (confrontation and emotional encounter). He can prevent individual analysis and encourage group consensus.

²²Knowles, op. cit., p. 49.

Ninth, the therapist provides the "expert knowledge" and the tools which help the group to dig into their tasks. The therapeutic non-verbal communication experiences described in the last section of this chapter are suggested when appropriate.²³ Programatic devices give new channels of communication, provide stimuli for individual spontaneity, and give a sense of cohesiveness at the beginning of a group. Use of such devices may reduce initial anxiety and encourage silent and passive members of the group to participation on an active basis. Also, such devices get around "politeness" rather rapidly. The author once had the experience of fingerpainting with a group of "proper ladies" who were really forced to let their hair down and "mix in it." The proper and sage use of programatic devices can speed the group into more mature stages.

Finally, the therapist is available to help individuals through his support when there is great anxiety and feelings of inadequacy for the tasks at hand.

In the same lecture,²⁴ Clinebell also gave a list of "Do's" and "Don't's" for therapists.

²³There are many programatic techniques to aid the group. Knowles describes some of these in Ibid., pp. 115-121. Robert Blees has an excellent section on the use of role playing in Counseling With Teen-Agers (Englewood Cliffs: Prentice-Hall, 1965), pp. 29-53.

²⁴Clinebell's lecture, op. cit.

Do's for therapists:

- try to reflect accurately
- try to improve clinical skill
- find your own blind spots
- remember you are a member of the group
- rely on group process
- recognize responsibility for expert leadership
- use democratic leadership
- share your knowledge when it is a useful stimulus
- help persons tolerate differences and different-ness
- reflect major group consensus'
- distinguish socially real themes, anxieties, and defenses
- acknowledge lack of knowledge
- remain curious and investigatory
- accept role of guardian of "therapeutic context"
- formulate therapeutic objectives

Don'ts for Therapists

- don't underestimate your own motives--talk about goofs
- don't behave spontaneously in the group
- don't act until you know what will happen
- don't act as authority for persons to imitate
- don't cure persons through authority
- don't help group defend pathology
- don't over-use authority to create co-hesiveness
- don't think you have to be a father--the group is not a family
- don't forget you are a patient in your own group.

The emphasis of the group therapist is to help the group become the therapeutic agent, and not to have individual therapists who meet in a group. The new entity, which is the group itself, is the therapeutic agent.

Jerome D. Frank expresses well the function of group therapy:

Therapy groups differ from individual therapy chiefly in their greater nearness to everyday life. They differ from ordinary social groups in their encouragement of honest expression of feeling and in granting status for reasons other than achievement. This combination of factors help patients to discover

unsuspected similarities, which counteracts their sense of isolation and facilitates production of attitude change. Therapy groups arouse patients emotionally through their pressures to self-revelation, through differences in outlook, and through rivalries arising from differences in life experiences and from stimuli in the group situation itself. They increase members' hopes and heighten their self-respect through fostering a sense of group-belongingness, affording examples of progress to each other, and giving them opportunities to help each other. They promote cognitive and behavioral change through the provision of multiple models, encouragement to express and examine feelings toward fellow group members and the therapist, and pressure to maintain communication despite conflict. Changes produced in the group are stabilized by the members' internalization of group standards, which usually are healthier in some respects than those of the individuals composing the group.²⁵

It is appropriate at this point to turn now to make an analogy between the therapeutic group and the koinonia.

The Koinonia and the therapeutic group. The task of the church in Christian tradition has been divided into three distinct tasks. The first is the kerygma which is the communication of the act of God in Jesus Christ. We have already examined the various affirmations of the kerygma. The second function of the church is the didache which is teaching the historical element of the faith and relating the insights of faithful persons of the past. The third task of the church is koinonia which is the establishment of a community of persons related to each other

²⁵Jerome D. Frank, Persuasion and Healing (Baltimore: Johns Hopkins Press, 1961), pp. 189-190 as quoted by Clinebell, Basic Types . . ., pp. 210-211.

in a "vertical dimension."²⁶ The tasks of kerygma, didache, and koinonia are all interrelated, and no one can be fully realized without the realization of the others.

With real limitations, it is possible to draw an analogy between the koinonia and group therapy. The action of the koinonia is to become a caring, loving, redemptive community in which there can be healing of broken persons, in which a person can hear and experience the good news of God's action in the Christ Event embodied in the kerygma.

The writer of Ephesians speaks of the koinonia

. . . remember that you were at that time separated from Christ, alienated from the commonwealth of Israel, and strangers to the covenants of promise, having no hope and without God in the world. But now in Christ Jesus you who once were far off have been brought near in the blood of Christ" (Ephesians 2: 11b-12).

The before and after described by the writer of Ephesians are the difference found in not being and in being part of the koinonia. The koinonia ends alienation from the covenant community (Israel), ends ignorance of God's action, ends hopelessness, and brings a person near because of God's act in Jesus Christ.

There is direct analogy between the covenant community of the church, first seen in the covenant with Israel and later in the new covenant in Christian

²⁶Ibid., p. 46.

community. Knowles states:

Because God is faithful, the people of God are in covenant not only to be faithful to him, but to be committed in love to one another. In fact, their commitment to one another is grounded in and a witness to God's faithfulness to His own. The problem arises because God's people are covenant-breakers. They fall away from faithful commitment to each other. The world of impersonality, hostility, envy, search for power and glory invades the church. It becomes the community where relationships are superficial and distant. People do not stand with, meet, and become involved in depth with one another.

The counseling group in the context of the church takes the covenant to one another seriously. Members covenant to hold in confidence that which is shared in the context of the group. Each learns that he can share himself fully without being gossiped about. He finds a community that is faithful to honor the trust that he invests in it.

The covenant operates at an even deeper level. Each member finds that a group will stay with him in spite of who he is and what he does in the group. In most social groups, even in the church, each person screens his behavior carefully. To be accepted, a person feels he must be acceptable. But the counseling group is faithful to hear and to respond to each member, to face and meet each other. When a member violates the covenant, the group disciplines him . . .

The counseling group, therefore, helps church members learn what it means to belong to a covenant community. In such a group the idea of the church as a covenant people becomes concrete in the history of the experiences of group members. Within such experiences, the word of God's faithfulness takes on vital meaning . . .²⁷

A second point of analogy between the group therapy situation and the koinonia is that both are "confessional

²⁷Knowles, op. cit., pp. 32-33.

communities."²⁸ Participants of the group confess who they really are and how they really feel, and, as we have seen, the confession is heard with accepting ears. ". . . The chasm between who he is and what he ought to be is bridged. New energies are available for authentic living, and a way is opened up for faith's adventure in relationships with God and one's brethren."²⁹

A third point of analogy is at the point of a caring, loving community in which the participant is free to open his life without fear of rejection. It is the caring community which creates the atmosphere in which there can be confession. This is not to say that the community will not suggest alternative modes of existence which are more appropriate, but that the person himself will be accepted.

The koinonia can be experienced for some people only after they have participated in a counseling relationship. Clinebell says of these persons,

Because of their crippled ability to establish need-satisfying relationship, many church members cannot contribute to the establishment of koinonia. Their presence is divisive not uniting, pathogenic not healing.³⁰

Only after these persons find need-satisfying relationships, to use Clinebell's term, are they able to

²⁸Ibid., p. 32.

²⁹Ibid., p. 33.

³⁰Clinebell, op. cit., Basic Types . . ., p. 47.

contribute to the vitality of the church's ministry.

At this point, it is appropriate to turn to the discussion of non-verbal therapeutic communication experiences as they might be used in the context of group pastoral counseling.

Therapeutic Non-Verbal Communication Experiences and Kerygma

Therapeutic Non-verbal Communication Experiences (henceforth TNVCE) are programatic devices which make use of communication theory in a therapeutic way. TNVCE are not merely games to be played, but have deep therapeutic value. TNVCE are based on the conversion of feeling into a physical equivalent. In this form there is new possibility for insight into their meaning and into possible alternative modes of expression.

The process of organizing various TNVCE is difficult since there is wide variation in meaning to the participants. Further, the experiences themselves are not easily categorized.

Schutz in, Joy, organizes TNVCE into two categories: those which have to do with "personal functioning" and those dealing with "interpersonal relations."³¹

³¹William C. Schutz, Joy, Expanding Human Awareness (New York: Grove Press, 1967), chapters 3 and 4, pp. 51 to 186.

Personal Functioning. If a person is functioning fully, he is using all the bodily equipment he has. Just as components of a race car can be tuned and improved, the components of communication of the self with environment can be tuned and improved. The goal of increasing personal functioning, according to Schutz, is to increase joy in life. Schutz's assumption is that "the chief source of joy is the realization and use of one's resources."³²

Bernard Gunther has called the use of personal resources "sensory awakening." He says that most adult human beings have dulled their sense ability, relying mostly on the eye receptor. "Seeing," he states, "can divide space, keep things at a distance . . ."³³ He goes on, "In our ignorance of the other senses, we become imbalanced, tense, insensitive. Listening to content rather than tone, rhythm, or pitch, we lose contact with the subtle messages of nature (all around) un/sound."³⁴

The realization and use of one's resources, or sensory awakening, is a creative process. Creativity is a process, which says Schutz, "implies not only the full use

³²Ibid., p. 54.

³³Bernard Gunther, Sense Relaxation Below your Mind (New York: Collier, 1968), p. 20.

³⁴Ibid., p. 21.

of one's capacities, but also includes going beyond them into previously unexplored areas."³⁵ The creative process divided into five steps: Freeing, or acquisition; association; expression; evaluation; and perseverance.

First is freeing or acquisition in which a person is "open to experience, able to perceive and sense his environment, and be aware of his own internal feelings."³⁶ This is the stage of gaining "input data" in the form of experience and information. The requirement of acquiring information is the ability to learn. The requirement of acquiring experience is awareness "of one's environment through better developed senses . . ."³⁷ Also, there is another part of freeing and acquisition: "the awareness of feelings emotions allows experience to be felt and integrated into the self."³⁸ Feelings and emotions add to the experience of the individual.

The second aspect of creativity is association. After acquiring or freeing, the various pieces of experience need to be associated with, or related to, each other. The creative act involves using elements that already exist in the creator's experience "and realizing

³⁵Schutz, op. cit., p. 54.

³⁶Ibid., p. 55. ³⁷Ibid., p. 56.

³⁸Ibid.

that relating them would lead to something new and desirable."³⁹

Association of experience can occur in terms of information, sensations or feelings. "The more highly developed a person's ability to associate in all three modalities, the greater his possibilities for making unusual, satisfying, and valuable connections of elements that are not obviously related."⁴⁰ It follows that a person who is able freely to explore his experiences is able to make the most satisfying relationships.

The third step of creativity is expression. Expression of the new association of experiences is necessary. The language of expression can be verbal, or non-verbal. The freedom to use all languages, (verbal, sign, action, and object) enhances communication of the new association. Acquisition of skills enable new expressions and forms of communication. The ability to paint, or dance, or express in music, or all other communicative media contribute to creative expression.

The fourth step of creativity is evaluation. Many expressions of newly formed associations can be generated in creativity. Some of the new relationships have great value; needs are satisfied. Some of the new

³⁹Ibid., p. 63.

⁴⁰Ibid.

creations are worthless. Evaluation of scientific creations can be quite objective: does it work or not; does it satisfy the situation. Evaluation of behavior creations is more subjective. Schutz uses the word "feel" to label the subjective evaluation situation:⁴¹ does it "feel" right? The intelligence is signaled through bodily sensation.

Ability to respond to these sensations can be very profitable in abandoning some trails and pursuing others. There will be errors, but learning to respond to the bodily sensations increases the likelihood of arriving at a satisfactory conclusion.⁴²

And later Schutz states:

Cultivation of the sensitivity to prelogical cues expands a person's capacity for making sensible judgments. It is simply a matter of training oneself to be sensitive to signals already present within, and being able to use them for one's own benefit.⁴³

The final step of creativity is perseverance. After the creation of a new idea or association which satisfies the situation, detailed work and much effort are in order.⁴⁴ Perseverance should last until the creation has achieved its full potential. To give up trying prematurely means that there is never full realization of potential. To persevere too long with an idea, beyond its return, is a waste of energy which could well be devoted elsewhere.

⁴¹Ibid., p. 73.

⁴²Ibid.

⁴³Ibid., p. 75.

⁴⁴Ibid., p. 55.

Schutz' scheme for increasing joy in human life is to develop and realize all the human resources possible. This is called "creativity." For each of the creative steps, Schutz suggests various TNVCE which will aid a person in his quest. Let us turn now to the second category of TNVCE.

Interpersonal Relations. Schutz proposes that there are three basic interpersonal needs which form the basis of dealing with realizing the full human potential between man and man.⁴⁵

These interpersonal-need areas are inclusion, control and affection.

The first interpersonal need, inclusion, refers to "association between people, being excluded or included, belonging, togetherness."⁴⁶

Self-identity is essential in understanding inclusion needs. To be a distinct, identified, separate individual requires a strong sense of selfhood which is recognized and affirmed by others. "The extreme of this identification is that he be understood. To be understood implies that someone is interested enough in him to find out his particular characteristics."⁴⁷

⁴⁵Ibid., p. 117.

⁴⁶Ibid.

⁴⁷Ibid., pp. 117-118.

The second interpersonal need is control. Schutz says:

Control behavior refers to the decision-making process between people, and the areas of power, influence and authority. The need for control varies along a continuum from the desire for power, authority, and control over others (and therefore over one's future), to the need to be controlled, and have responsibility lifted from oneself.⁴⁸

Control is unlike inclusion in that the central concern is for dominance, not prominence. Involved in the issue of control are several factors. The need to control another is a limitation of the other's freedom of expression. Output from the other needs to be cleared with the controller before expression. On the other hand, the need to be controlled indicates a lack of personal responsibility for decisions.

Schutz characterizes the dominant person as the "autocrat" who is afraid that people will control him; so, he does them first. The submissive person is the "abdicrat" who fears his own adequacy to make responsible adult decisions and manipulates others into taking responsibility for him.⁴⁹

The third interpersonal need is affection. Affection refers to the degree of emotional ties between individuals, especially in the form of love and hate.⁵⁰

⁴⁸Ibid., p. 118.

⁴⁹Ibid., pp. 153-154.

⁵⁰Ibid., p. 119.

Affection behavior differs from control behavior in that the emphasis is on emotional relationship rather than power relationship. It differs from inclusion behavior because it does involve strong emotional ties.

The "underpersonal" person avoids others and emotional ties. There is a deep anxiety that he is "unlovable." "If people got to know him well, he believes, they would discover the traits that make him so unlovable."⁵¹

The "overpersonal" person seeks to relieve anxiety that he is unlovable by trying to be extremely close to others. His techniques are overt attempts for others' approval, being extremely personal, ingratiating, intimate and confiding.⁵² The "overpersonal" person is likely to be possessive in relationships, seeking to be the only friend and needed by others.

The interpersonal needs of inclusion, control, and affection each have their associated anxieties. The inclusion anxiety is that the self is non-existent, that it will not be recognized by others as worthwhile. The control anxiety is that the self is irresponsible, and finite. The affection anxiety is that the self is unlovable.

⁵¹Ibid., pp. 174-175.

⁵²Ibid., p. 175.

The satisfaction of the interpersonal need for inclusion would lead to self-identity. The satisfaction of control needs would lead to self-direction. The satisfaction of affection needs would lead to self-acceptance.

Schutz suggests TNVCE to help resolve each of the interpersonal needs. The TNVCE help clarify feelings and issues, as well as giving suggestions for alternative behavior. The TNVCE used in inclusion deal with contact and human encounter. In the area of control, the TNVCE deal with top-bottom spacial relations and various levels of strength. In the area of affection, the TNVCE deal with the giving and taking of affection.

Categories of TNVCE and the Kerygma. The proclamation of God's action for man has been divided above into five specific affirmations which are taken with the eyes of faith. These five actions of God, which comprise the kerygma, had analogues in the actions of the therapist. When the therapist's activity was described in Rogerian terms, there was a fairly direct analogy. When the therapeutic communicator's (therapist's) activity was described in the terms of Reuel Howe, there was still a good analogy, although with considerable overlapping of categories.

It is also possible to draw an analogy between the kerygma and the categories of TNVCE as set up by Schutz.

As in the previous analogies, the natural temptation is to begin with the categories of TNVCE and fit the affirmations of the kerygma into this scheme. However, it is more appropriate to start with the action of God to see how the categories of TNVCE are analogous to it.

1. The first affirmation of the kerygma is God's incarnation in which God took on the frame of reference of man, showing divine empathy. The analogous activity of the therapist is to show empathetic understanding. The healing response of man is to become aware of himself, to have self-understanding.

All the processes of personal functioning, in Schutz's terms, are creative processes leading to self-understanding. The specific TNVCE which aid in the creative process are based on the assumption that full living is creative living, which means understanding the relationship of the self to the environment. Freeing and acquisition is the gaining of new information and experience by the individual. This means obtaining a new frame of reference, receiving feedback from others about the self, and learning to experience and understand experience as seen in others.

The kerygma also asserts the "newness" of the incarnation. God has acted in a new way through existing elements, himself and man. Integrating diverse elements

into new associations is the second step in the creative process, and also part of the analogy between the kerygma and creativity.

God's expression of himself in the incarnation was in Jesus Christ. Expression of the new association of seemingly-unrelated elements is part of the creative process.

God's incarnation in Jesus met human need historically. This is a faith statement, but based on the testimony of those whose needs were met. The evaluation of the created associations for man in new and more fulfilling ways of existence is subjective, based on "feel." TNVCE which aid in the evaluative task are those which give greater awareness. The real evaluation of God's action for man, from man's perspective, is not objective, but rather very subjective.

Finally, God's action in the incarnation exhibited perseverance in two senses. First, it was a culmination of prolonged efforts to establish relationship through the Old Covenant, now accomplished in the New Covenant. Secondly, the revelation in the historical Jesus provided a basis for continued revelation in the Christ of faith. TNVCE in the area of perseverance are somewhat analogous in that after an initially evaluated association, persons are encouraged to continue their pursuit of the new creation.

2. The second affirmation of the kerygma is that God has remained God even in the incarnation. We have called this Divine Congruence in which the diety of God was never lessened, but always self-consciously identified as being Other. Divine Congruence, as we have seen is analogous to the therapist's congruence. The result of both Divine Congruence and of the therapist's congruence has been self-identity.

There is a direct analogy between Divine Congruence and the TNVCE which deal with inclusion in the area of interpersonal relations. The successful resolution of inclusion needs within the individual leads a person to a self-awareness and a self-identity. Because of this, a person can be comfortable when he is alone or in the company of others.

The TNVCE which deal with individual meeting and encounter encourage interdependence (a strong sense of I but in relation to you). TNVCE which deal with individual response to interpersonal relationship aid in the development of self-identity.

3. The third affirmation of the kerygma is God's forgiveness in which He accepts man in a radical way even in the face of man's seemingly unacceptableness. The analogous action by the therapist is acceptance of the counselee. Such forgiveness and acceptance by God and the

therapist leads to self-acceptance on the part of the recipient.

The analogy of God's forgiveness and the TNVCE which deal with interpersonal affection can be drawn. A person either maintains distance between himself and others or is closely bound in an emotional tie depending on his feeling of acceptability. The anxiety is that the self is unlovable, unacceptable. The acceptance of what seems unacceptable, the forgiveness of finite limitations, the acceptance "as is" each bring a person to self-acceptance.

4. The fourth affirmation of the kerygma is of God's grace. This is the affirmation that man is loved by God, not because he deserves it or ever will deserve it, not because man has earned this love or ever will earn it, but because God's love is simply of this nature. The analogy was drawn between God's Grace and the therapist's permissiveness in which the counselee is free to express himself, feeling safe that he will not alienate the therapist by his expression. The results of God's grace and the therapist's permissiveness is self-direction.

TNVCE which deal with expression in personal functioning and with control in interpersonal relations are somewhat analogous to the kerygmatic affirmation of Grace.

Expression of newly associate elements is to be done without evaluation. There is to be no judgment as to

appropriateness or inappropriateness at this stage. Knowing that there is no judgment a person is free to be himself. With freedom of expression there can be a process of evaluation, and self-direction can ensue; then a person can take responsibility for his own action.

TNVCE which deal with control are also analogous to God's grace. As stated above, the need to control is an attempt to organize environment in the present and future in order to relieve the anxiety of self doubt and self limitations. If all is controlled, there is no confrontation with limitations. On the other hand, the need to be controlled is also an expression of the anxiety that the self is incapable of taking personal responsibility. If others will make the decisions, the anxiety will be avoided.

Successful resolution of control-needs in interpersonal relations opens a person to self-direction. He can be comfortable when he assumes his responsibility. He can be comfortable when someone else is responsibly accepting his own involvement as an act of self-direction. He neither has to run from responsibility nor prove his competence.

5. The fifth affirmation of the kerygma is Divine Love. This affirmation states that God's love generates a genuine response within man to act for others. The

analogous action of the therapist is unconditional positive regard in which the therapist's relationship with the counselee frees the counselee to act for others.

Of all the affirmations of the kerygma, this is the most difficult to make a direct analogy with TNVCE. Certain experiences in the affection need category affirm the worth of an individual emphasizing his positive attributes. These, however, more rightly fall in the forgiveness aspect of the kerygma.

It is the combination of all the group, the feeling and experience of being understood, of being forgiven, of being permitted to be a unique self, and of having "I-Thou" relationships with congruent others which makes love in its agapē quality a reality, and which then frees one for others.

It needs to be emphasized again that the analogy between God's action as expressed in the five affirmations of the kerygma break down when comparing the absolute action of God and the limited, finite action of a man as therapeutic communicator using TNVCE.

Nevertheless, the categories of TNVCE have been shown to have some analogous relationship with the affirmations of the kerygma. Accepting the limitation of human finiteness, TNVCE also can be considered to be an arena of God's action to save man.

A tabular summary of the affirmations of the kerygma and TNVCE is presented below.

God's Action in the Christ Event	Believer's Response	Therapist's Activity	TNVCE Category	Healing Process
Incarnation	Being known	Empathetic under- standing	Creativity Acquisition Association Expression Evaluation	Self-understanding
Divine Con- gruence	Being oneself	Congruence	Inclusions experiences	Self-identity
Forgiveness	Being forgiven	Acceptance	Affection experiences	Self-acceptance
Grace of God	Being liberated	Permissiveness	Control experiences Expression Evaluation	Self-direction
Love of God	Loving others	Unconditional positive regard	Affection experiences Cumulative af- fect of all TNVCE	Freedom for others

It is appropriate to turn now to the TNVCE in the experiemental pastoral counseling group at the Claremont Area Pastoral Counseling Center.

The Use of TNVCE in the Experimental Group

The experimental group was made up of individuals who had come to the Claremont Area Pastoral Counseling Center for pastoral counseling. These individuals were invited to participate in the group led by the author, knowing in advance that there would be TNVCE used in the course of counseling, that there would be weekly reports to make, and that the group as constituted would have a limited life.

The experiences described below are organized according to the "healing processes" which result from each of the five divisions of the kerygma and the therapist's activities as described above. The difficulty with this organization is that there is much overlap between the processes; the TNVCE do not always fit neatly into categories of experience. Nevertheless, the author feels that this is the most constructive organization.

The TNVCE below are not intended to be a complete catalog of TNVCE, but only those used in the experimental group. Readers interested in a more complete listing of TNVCE experiences might consult Schutz's Joy, Expanding

Human Awareness⁵³ which gives a number of TNVCE together with comment by Schutz on their use in his groups. Bernard Gunther's book Sense Relaxation Below Your Mind⁵⁴ is an almost dramatic poem involving the reader in "sensory awakening." This work is especially relevant in the area of personal functioning in what Schutz has called acquisition and freeing. The first section of Gestalt Therapy, Excitement and Growth in Human Personality⁵⁵ by Frederic Perls, Ralph F. Hefferline, and Paul Goodman also suggests many TNVCE in which a person may be involved in contacting his environment, becoming aware, and changing the self. George B. Leonard in his book Education and Ecstasy⁵⁶ carries the concepts of creativity and educational experiences which use non-verbal communication techniques into the general education system to explore the dramatic change in the quality of life which could be possible by using present knowledge.

The TNVCE described in these works by no means exhaust the possibilities. It has been the author's experience that new forms of TNVCE arise out of particular situations. The impact of spontaneous TNVCE seems to be

⁵³Ibid. ⁵⁴Gunther, op. cit.

⁵⁵Frederick Perls, Ralph E. Hefferline and Paul Goodman, Gestalt Therapy (New York: Delta, 1951).

⁵⁶George B. Leonard, Education and Ecstasy (New York: Delacorte Press, 1968).

quite dramatic. This experience has been confirmed by others.⁵⁷

1. Self-understanding. The first category of TNVCE includes those experiences which lead to self-understanding. As stated above, these are experiences which are part of the creative process including experiences of acquisition and freeing, of association, of expression, evaluation, and perseverance. The experimental group used several such TNVCE.

Body Awareness. At several points in the group sessions, the participants were asked to become very aware of the non-verbal messages which their bodies were sending to them. One way of doing this was to sit and concentrate on each of the senses, to experience fully the input to each organism. On the night of the first group meeting as the opening experience of the group, each person was asked first to look to see everything in the room, including people, shapes, colors, patterns, and so on. Then, the sight sense was shut out by shutting the eyes and the participants were asked to concentrate on audial input; then, on the sense of touch; then on the sense of smell,

⁵⁷The author's personal experience with "spontaneous" TNVCE was confirmed by the experience of Dr. Frank Kimper in groups he led at the Claremont United Church of Christ. Also, a statement to this affect was made by Bernard Gunther during the proceedings of the Annual Convention of the American Association for Humanistic Psychology, August, 1968.

and finally on the sense of taste. At this point the participants were asked to identify emotions and feelings which they were experiencing, especially in relation to the others in the group and their own participation in the group.

There were no written comments on the TNVCE in the weekly reports, but in the verbal interchange immediately following there was general agreement that there is much sensory input which goes unidentified and un-noticed. In addition, there was articulate verbalization of the anticipatory anxiety connected with a new group.

A TNVCE variation of body awareness is what the author calls instantaneous awareness. This has been especially useful at times when the content level of the group session seemed far from dealing with the existential need. In the midst of the conversation, the leader claps his hands and asks each participant to become aware of his body language, position, eye focus, feelings of tension, immediate preceding movements, and feelings at the time of the clap. Again this TNVCE was not written about in the weekly report, but the author found that many of the participants were in fact far from the group and the internal non-verbal messages that each was receiving indicated this distance.

A TNVCE which increases awareness of the non-verbal messages within the radius of the organism is blind leading. In blind leading pairs are formed. The instructions are given for

one person to close his eyes and the other person leads him by the arm on a . . . blind walk. There is no talking during the entire experience. The person leading the walk has his partner touch, smell, feel and have as many interesting experiences as possible.⁵⁸

After the allotted time places were switched. In both the written weekly reports and in the sharing immediately after this TNVCE there was general expression of knowing many things in a new and different way. An additional element was indicated by the weekly reports: the quality of the experience seemed to be greatly dependent on the trust that the partners felt for each other. PB reported of her experience with JR: "JR and I did the blind-leading experience. Being led I felt very secure; JR showed me many things. I could hear sureness in her step and this made me feel sure and secure. I felt good about leading JR. I wanted to show her grass, trees, cars in the gentle manner she used for me." PB had been the only group member to be really close with JR at this point; the author had observed understanding and warmth between them. Contrast this experience with that of JP whose partner

⁵⁸Gunther, op. cit., p. 58.

was RW, an 18 year old girl with difficulty in establishing human relationships. JP reported: "I felt like I might run into something at any time. I felt safer with my eyes open leading my partner."

A technique which the author calls doubling involves both verbal and non-verbal elements. In doubling, an absent person can be brought into the group in a very real way. SM, whose husband was committed to a mental hospital, was requested to have a conversation with him (the him being represented by an empty chair) and to play both persons by changing chairs. SM literally exploded at the response she, as her husband, had made to herself. The perception of the interaction between she and her husband was immediately apparent, and it was possible to begin to deal with the feelings of helplessness and anger because her husband was mentally ill.⁵⁹ SM in talking of this doubling experience at a later session reported how much insight she had gained into her own feelings and into the feelings she generated in her husband.

At another point, JP was asked to double with her teenage daughter who was rebelling in outright antagonism

⁵⁹This experience occurred in a group which had met for the three months prior to the formation of the experimental group. The doubling experience for SM had such an impact that she shared the insights gained with the experimental group.

(interrupting telephone conversations to swear at her mother). JP refused to double even after the group prodded her for twenty-five minutes. In real frustration, the group pointed out how much she had been resisting anything which would give her insight into her own mis-actions towards the daughter which was causing the rebellion.

One interesting use of doubling is to experience the self at an early age by making a signature very slowly, barely moving the pen. Another use of doubling is to ask one participant to assume the bodily position and mannerisms of another participant. There is a two-way insight; first, the person doubling experiences being the other; second, the person being doubled perceives how another perceives him.

A TNVCE which is similar to body awareness is alone time. The instructions are given for a person to be alone to reflect on the events experienced, to reflect on relations with others, on insights gained, and how the insights gained might be used to effect change where appropriate. The alone time was programmed into the group by the use of the weekly report of group sessions which included the following questions:

Describe how you felt at the beginning of, during, and at the close of this session.

Describe the non-verbal experiences used in this session and what it was supposed to illustrate.

Describe your participation in this experience including comments about your comfort and discomfort.

What insights did you gain about yourself from this experience?

In what specific ways are you going to change your behavior on the basis of this insight?

How did you feel about the leadership during this session?

Describe your feelings toward the group in general and toward specific members of the group.

Several of the participants of the experimental group verbalized that the weekly report of the group session served to aid in the reflective process.

The weekly report of the group session illustrated one other thing; the ability of individuals to carry through commitments. One of the members CJP, a 17 year old girl who has had periods of deep depression including a suicidal episode, returned only two of six weekly reports (she was absent three times and no report was requested of the final session). The failure to take this responsibility indicated great resistance toward looking at the internal resources which she had to meet life more adequately. The author noted no real growth of CJP during the life of the experimental group.

The weekly commitment to attend the group session, the commitment to write the weekly report of the group session, the payment of a fee, are all forms of TNVCE which have encouraged perseverance in the task of personal growth. Newly formed and expressed ways of relating had a ready-made proving range in the group's continuance.

2. Self-identity. The second category of TNVCE includes those experiences which lead to self-identity. Self-identity is the result of knowing the self over against the other because the other has responded as one being to another being.

Feeling space is a TNVCE which aids in the process of one person making contact with another person. All the members of the group sat in a circle and were asked to close their eyes. Then they were asked to stretch out their hands to feel their space--in front of them, behind, below, over, and beside them. The reactions of feeling space were mixed. PB felt the space as lonely and empty "until I discovered a body on either side of me." She goes on, "I was really feeling alone until I felt the concern and need toward the people near me . . ." JR who felt uncomfortable straying out of her immediate space wrote: "I've noticed that for some reason, I'm guarded. I want to communicate more than I do, but I keep a "low" wall up; one that I can get over but no one else can get in, at least not completely." In response to what she was going to do about her insight, JR wrote, "I want to get rid of my protective wall, and I'm going to make an effort to let myself become open to others, not just the group, but all the people I come in contact with," Following the time of feeling space, a discussion was opened up on various feelings of aloneness and contact, and how the

members of the group felt about others coming into their life-space.

Another TNVCE which helps to develop self-identity in relationship to others is milling. The experimental group used three variations of milling: blind milling, visual milling, and milling to place. In the first variety of milling, the group members were asked to shut their eyes and start milling around the room. When people met, they were welcome to explore each other in whatever way they wished. There was general apprehensiveness about this experience, with several persons reporting that they remained nearly stationary. The lack of specifics by the group in the weekly reports may be explained by Schutz's experience. He states:

Frequently the feeling is more general than individualized. That is, the experience is more significant for encountering the generalized other--the group--than it is in contacting individuals. For that reason, this method frequently enhances cohesive ties within the group. Moreover, it sharpens awareness of the other people as human beings.⁶⁰

The experience with visual milling is the same as blind milling except the group members were instructed to look into the faces of those people they passed in milling. Again, there was little discussion of this experience on the weekly reports, but the discussion

⁶⁰Schutz, op. cit., p. 124.

immediately after the experience revealed that people found it much easier to make visual contact than to make body contact, and that visual contact was substituted for body contact.

Milling to place is the same as visual milling except the participants were asked to stand still when they were comfortable in a particular location. After everyone had found a stopping place, they were asked to have some alone time to reflect on where they had stopped in relation to others in the group. SM reported that she consciously sought a location which was free of other persons and that this reflected much of her life.

Break-in is a TNVCE which aids in the process of finding self-identity. CJP, who was absent for the first session of the group, was asked to break into a circle made up of the other group members who were standing with their arms tightly locked. CJP was instructed to break into the circle in what ever way she could. CJP made several weak attempts to get into the circle and then after a few minutes began to weep. At this point, JR made an opening and invited CJP to enter the inner circle. Unfortunately, CJP who participated in the follow-up discussion and understood the characteristic method she used to gain access to people, did not report on the experience except for a one word expletive in the weekly report. She

wrote: "BLAAH!" JR who responded to the tears indicated in the follow-up discussion that her husband had been able to manipulate her by whining during the four years of her marriage.

The experimental group used four specific techniques to know another person in a physical way. These TNVCE are called: hands, exploring the head, back talk, and non-verbal dyad.

Hands is a communication experience using the sense of touch. The group members were asked to divide into pairs, with each pair facing each other and taking the other's hands. The leader then instructed to participants to close their eyes and become very conscious of their hands. Then, in 30 second intervals the participants were asked to explore the hands, be playful with the hands, make the hands feel secure, fight with the hands, make up, and say goodbye. PB and RW experienced the hand TNVCE together. PB felt "very responsible, protective and almost maternal about RW." RW experienced real fear that PB would think her homosexual. The follow-up discussion revealed how much this deep homosexual anxiety affected RW's relationship with all females.

Exploring the head is also done with partners. In the experimental group it was done with the same partner as the hands experience, immediately thereafter. One

partner closes his eyes and explores the head of the other, paying particular attention to the texture of the skin, the skin tone, the texture of the hair, nooks and crannys of the face, and so on. After a minute or so the partners reverse their roles. Like the experience of hands, this TNVCE opened new possibilities of communication between members of the group. JR who expressed real fear in getting close to people felt the impact of meeting another in this way. She was moved to write, "I felt for the first time in a long time, in a real way, that I could actually have empathy instead of sympathy for someone." She knew another and felt enough of self to be separate in her own right.

Back talk happens when two persons place their backs against each other and have a back conversation, "talking," having an argument, being playful, being tender, exploring creative motions, and being very much aware of each other. In the follow-up discussion it was apparent that back talk was difficult for several of the participants. This was reflected also in weekly reports with such comments as "nervous," "difficult," and "discomforting." JR, however, really let go and commented, "I'm not too awfully clear on exactly what it meant other than you can communicate in just about any way. I enjoyed it, possibly because I didn't have time to think about how I wouldn't like it."

In the non-verbal dyad TNVCE pair partners carry on a conversation with each other without the benefit of words. There were no written reports of this experience, but a modification of it in the form of the non-verbal benediction became an important part of the group life. At the close of each session, each member was asked to give each other member some sort of non-verbal benediction. The leader inadvertently forgot the non-verbal benediction and was reprimanded by several members of the group for forgetting something of great importance. PB, in one of her weekly reports, wrote, "As I look back over our sessions, there has been one non-verbal experience we constantly use and very little is said about it--our benediction. For me it is a real chance to "express" something to another person that perhaps we didn't say during the meeting. Sometimes I am better able to express myself this way."

Each of the above described TNVCE have as a major emphasis to help an individual become aware of himself in relation to the others in his environment, and in the awareness of others and the others' awareness of the individual, self-identity emerges.

3. Self-acceptance. The third category of TNVCE are those experiences which lead to self-acceptance. These are the experiences in which the group tries to accept each

individual and affirm the worthwhile parts of their existence. These are what Schutz calls "affection needs."

Holding is one TNVCE used to show affection and acceptance. After CJP cried to gain admittance to the group as described above, the group felt that it was necessary to show her some sort of affection, some sort of acceptance. The technique of holding was used. CJP sat in a chair facing away from the group with her eyes closed. She described her feeling toward the group, her feeling of separation from the group. Then, each person in turn went to CJP and placed their hands on her until she was held from many directions. CJP found this experience very uncomfortable. She wrote tersely, "Not only this experience, but practically the whole session was to show me that there's no reason to be away and afraid of people. But I still find it hard to accept."

The Trust circle was, perhaps, the most powerful of the TNVCE, in the affection category. The trust circle consists of one person standing with eyes closed in the center of a circle made up of the rest of the group members. The instructions are for the group to do whatever it wishes with that person while he remains completely yielding to their ministrations. The group at times has cradled individuals, passed them around the circle, rocked them, lifted them over the heads, placed them on the floor, held them, and deserted them. SM was very much

frightened during the first trust circle. She winced, flinched, looked extremely pained throughout the whole experience. In the follow-up discussion she expressed the fear that someone would be dropped. In the weekly report SM wrote:

OK, so this experience really frightened me. I was afraid harm would come to the person in the center even though I knew it was unlikely, and the group would not intentionally hurt them. (Projection--I'm afraid to get hurt?)

So I'm afraid--so what else is new. You know it and so do I. I know this fear is irrational, it is a pattern, etc., etc. So I force myself where I can, repeating all the stupid platitudes to assuage my fear, but there comes a point where I have to retreat.

As tonight, I wanted to go into the circle but I was afraid I could not control myself and accept it as passively as the others.

I feel so terribly angry with you (the author). You put me on the spot. You were responsible for showing my vulnerability to myself again--and to the others. So it doesn't matter--the group won't hurt me . . .

Two weeks later, SM asked the group to be in the trust circle as something she herself desired. This is her report of that TNVCE.

I felt afraid at the first few seconds but then I felt the strong support of the group and started to relax. I felt almost serene when you were rocking me and when you put me on the floor my fear came back for a moment then disappeared.

I felt very elated and relieved as if some terrible burden had been taken off my shoulders. Was it my fear of people? I don't know but I felt this wonderful glow which I still have some four hours later.

The weekly reports as well as the follow-up discussion have indicated that this TNVCE has had a great

impact in bringing people into a deeper, symbolic awareness of trusting affection and concern. And in the trust of others has been a self-acceptance.

Another TNVCE is give and take of affection. There are at least two variations of this. The first is completely non-verbal. The person to receive affection stands in the center of the circle made up of the other group members. The person in the center closes his eyes and receives the non-verbal expressions of affection from the group members. These range from strokes to embraces. JR, who had remained rather far from the other members of the group was asked to be in the center of a give and take affection circle. The follow-up discussion revealed how difficult this was for JR, yet it was something she desired. After the experience JR expressed that she felt much more included in what was going on.

The second variation of give and take affection combines both verbal and non-verbal elements. One person is asked to go around to each other person in the circle, and while holding them in some way to express some feeling of a positive nature. RW experienced this. She found this difficult for two reasons. First she fears physical touch, and second she fears emotional touch. She wrote: "I don't usually tell people what I feel even if I think it, because I'll blow it. I didn't seem to blow it in the

group . . ." And later she wrote: "It was important to me . . ."

The experience of blind leading, although intended to be an acquisitioning TNVCE, also had strong elements of trust and affection, as we have seen.

The TNVCE which deal with the expression and reception of affection and closeness between people has the healing potential of self-acceptance. As persons understand that they are loved even though they are anxious about their lovability quotient they are able to accept themselves.

4. Self-direction. The fourth category of TNVCE includes those which lead to self-direction. Self-direction is a result of fulfillment of the control needs where the individual neither has to control everything which is going on around him nor be controlled by outside powers.

Within the experimental group several TNVCE were used to explore the power relations of the individuals in terms of physical power.

Danish thumb-wrestling was one of these. Another was Indian arm wrestling. The direct resolution of control problems by these two techniques is dubious. But as Schutz points out these two techniques increases a person's involvement within the group. "Lethargy fades and

involvement is usually greatly increased when a person must mobilize his energies into a concerted physical effort."⁶¹

In conjunction with a doubling experience in which JB was conversing with a black militant professor JB was asked to assume a position of inferiority by sitting on the floor in front of the professor. His voice was shaky and almost whiney in quality. After a period he was asked to stand on his chair to talk down to his professor. From that position there was a dramatic change in the quality of his interaction. What had been tentative became firm, commanding, certain and sure. In the follow-up discussion JB indicated how much easier it was to converse when he was in control and how difficult when he was controlled. This TNVCE is called spatially related power.

Pushing is another TNVCE which helps to explore the control relationships between persons. The two persons to explore this relationship stand facing each other and have the instructions to push the other against the opposing wall. GR and SM entered a pushing episode. Both had been in a previous group together. GR had announced his purpose for being in the group was to observe TNVCE which would help him in his social work. SM challenged that statement with obvious anger. It was suggested that the

⁶¹Ibid., p. 157.

verbal combatants explore the anger physically. GR began the experience as a joke feeling that he, a male, could easily push SM, a female. SM in her weekly report wrote: "At first I took it easy, rather naturally, but when I felt GR's resistance, I became angry even tried to throw him off balance to get my way." SM held her own. GR, who had not been allowed to enter the group impersonally and who had not beaten a woman in pushing, became hostile with the group and the leader. In his weekly report he wrote nothing of this experience and said his only insight was to reexamine his reasons for being in the group. GR dropped out of the group two weeks later, refusing to look with the group or with the author in an individual session, at the reasons for his hostility. The translation of control relationships into physical expression showed in this case the need for self-direction where GR was neither the controller nor the controlled.

Another TNVCE which evokes a response of self-direction is called break-out. Break-out is the reverse of break-in. The person is enclosed in the group with the instructions to break out of the group. JP entered this experience immediately after she had refused to enter the doubling session (described above). The group was quite agitated with JP and needed some way to express to her that she could break through her inhibitions with the group. JP agreed to enter the circle. After about five

minutes of feeble attempts to get out, JP verbalized "I give up." Nobody in the group responded verbally, but continued to maintain the tight circle around her. Five more minutes passed while she sat on the floor making no effort to break-out. On several more occasions she verbalized that she gave up. After more than 15 minutes JP, who is of a tiny build, exhibited real quickness and strength in a large effort and broke out of the circle. In the follow-up discussion the group participants shared their feelings of frustration and anger at JP's half-hearted attempts to assert herself. There was mutual agreement that JP would have been in the circle all evening had she not made the effort to get out. JP verbalized an understanding of the fact that she depended on other people to make her decisions and act for her. It was only in the most dire circumstances that she really exerted herself and then she felt remorse for doing so. It is interesting to note that JP omitted any reference to the break-out in her weekly report.

Resolution of the anxiety about the self's ability to make and take responsibility and ability to make decisions of actions means an ability to have self-direction.

5. Freedom for others. The fifth category of TNVCE leads to an ability to love others in the sense of having freedom to act on the behalf of others. As stated above, this is the most difficult of all the categories to isolate

specific TNVCE as examples. Rather, it is the culmination of all the TNVCE and the group process which produces freedom for others.

It is possible to give many examples of non-verbal communication between members of the experimental group which indicated a real freedom for the other. On several occasions when one participant was experiencing a particularly difficult moment, others would move toward the one to hold or be close in a supportive way. This was spontaneous and not programmed. It became apparent that the struggles of each person became the struggles of the whole group, and there was weekly concern to find out where persons were in their struggle. If the discussion did not reveal this, then time was taken in post-session for individual inquiry.

The difficulty, of course, is to know whether the TNVCE aided in the ability to have concern for the other, or whether this was one of the givens in each person at the start. It is unlikely that a ten week group did more than to give individuals new forms for the expression of an inner ability. Hopefully, the experimental group was one more assurance that the self is loved by others and in response can also love.

The TNVCE as described above are some of those used in the experimental group. They have been categorized into those experiences which lead to self-understanding,

self-identity, self-acceptance, self-direction, and freedom of the self for others. The categories are loose, and the TNVCE overlap into several of the categories in many cases. Nevertheless, TNVCE as experienced in the experimental group serve to illustrate in a tentative way that the same basic elements found in the Christian kerygma can be communicated uniquely to individuals within the pastoral group counseling situation.

CHAPTER V

SUMMARY AND CONCLUSIONS

Summary

This study has developed a theory of non-verbal therapeutic communication and given it a theological perspective.

Human communication takes place any time one person or the environment affects or influences another person. It begins at conception and continues until death within one of four settings: intra-personal which is the experience of the self in thoughts and feelings and sensory input; inter-personal which is between two or more persons; group setting in which the many become the recipient of messages or the sender of messages; and societal in which there are so many individuals that they must be statistically considered. The apparatuses used for such communication are receiver organs, effector organs, evaluative mechanisms, and the shelter for these organs.

Communication is disturbed whenever the message is perceived and interpreted in a distorted way. This happens for a variety of reasons, most of which find their root in an ontological concern for being. When the existential anxiety, to use Tillich's term, is reduced, then communication barriers are lowered.

Non-verbal communication is all communication other than verbal. There are non-verbal elements in verbal communication. Non-verbal communication can be codified into one of three kinds of languages: sign language, action language, and object language. Each language requires the mobilization of different receptor organs of the body, some of which have been dulled and atrophied from disuse.

Therapeutic communication is an intentional, purposive communication from one or more persons to one or more other persons which is intended to bring a change in the receiver(s). The person(s) giving therapeutic communication have the qualities of authenticity, openness, discipline, and relatedness. These terms used by Reuel Howe are similar to, but not exactly corresponding to the terms used by Carl Rogers to describe the therapeutic relationship. Rogers' terms are empathetic understanding, congruence, acceptance, permissiveness, and unconditional positive regard.

Therapeutic communication of both verbal and non-verbal variety tend to produce persons with "diological" qualities themselves. It also brings a change in the meaning of past experience as new data and understanding are brought to play. Therapeutic communication opens new possibilities and alternative modes of behavior. And it

also can bring a new understanding of truth.

Therapeutic non-verbal communication experiences are programmatic devices which have a therapeutic intention and which stress the non-verbal elements of human communication.

After this initial look at therapeutic communication, the focus of this study was shifted to develop a theological perspective of therapeutic communication. This task was accomplished by making affirmations of the elements of the kerygma and postulating that counseling had analogous elements.

The kerygma is the communication, verbally and non-verbally, of God's action in the Christ event. The affirmations of the kerygma are at least five-fold: first, God became incarnate in the world, participating fully in the human predicament in the flesh; second, that although God was fully man, he retained his identity at all times as God, the wholly other, and was hence both very man and very God; third, that God has forgiven man for his human limitations and accepted him fully as man; fourth, that God's grace is such that man can neither earn nor lose God's love by his actions, rather God's love is unconditional; and finally, that God's love is of such a quality that there is an automatic response in man to become a loving person himself, being free for others.

Recognizing the obvious limitations between the absolute quality of God's activity and the finite quality of man's activity, an analogy was drawn between God's activity as proclaimed in the kerygma and the therapist's activity as he seeks to serve the counselee(s). The incarnation is analogous to empathetic understanding since in each case there is a self-conscious attempt to take on the frame of reference of the other: God becoming flesh, the therapist feeling with the counselee. The incarnation brought the believer to a feeling of being known, of having a relationship with God. Empathetic understanding brings the counselee to a feeling of self-understanding.

Divine congruence is analogous to the therapist's congruence. God remained self-identified as God, the wholly other, not losing his deity in the incarnation. The therapist retains his own identity by being responsible for his own reactions, emotions, and behavior even in the midst of being with, and feeling with, the counselee. Divine congruence elicits the response of being oneself. The therapist's congruence helps the counselee come to a self-identity.

God's forgiveness is analogous to the therapist's acceptance. God has forgiven man for his humanness. All that remains for man to do is to accept that acceptance. The therapist's acceptance is a non-judgmental attitude of acceptance of the person in spite of inappropriate

behavior and feelings. The conscious attempt is to affirm the self-hood of the person even in the midst of seemingly unacceptable conditions. God's forgiveness leads the believer to being forgiven. The therapist's acceptance leads the counselee to self-acceptance.

God's grace is analogous to the therapist's permissiveness. God's love of man is not conditional on man's action. Man can neither earn nor lose God's love by his action; this frees man to act not according to law, but to seek to live according to the inner spirit. The therapist's permissiveness allows a non-judgmental relationship in which the therapist does not take responsibility for the counselee, but encourages self-motivated responsible action. God's grace gives freedom of action to man. The therapist's permissiveness gives self-direction to the counselee.

Finally, God's love is analogous to the therapist's unconditional positive regard. God's love is of such a quality that it evokes from man a response of love for others. God's love is a creative, moving force. The therapist's unconditional positive regard for his counselee gives the counselee a freedom for others. No therapeutic process would be complete unless there was movement of concern toward other persons.

After making this analogy a modification of the qualities of a therapist was made, using instead the terms

of a therapeutic communicator to fit them into the analogy. Although the terms do not have a one-to-one correspondence, it was shown that the action of God in the Christ event has analogous elements in therapeutic communication.

At this point attention was given to the process of a therapeutic group, tracing the stages of group life and, the role of the therapist in the group counseling situation. The group was compared with the Christian koinonia in three ways. First, it is a loving, caring community of persons deeply involved with each other in the most basic issues of life. Second, the therapeutic group takes seriously the idea of covenant between the members of the group. The covenant is in terms of the formal commitments between the group in the organization, but even more deeply in the covenant to stay with each person mediating forgiveness and freedom to be real. Third, the therapeutic group is a confessional group in that sense that each person is free to confess who he is without fear of rejection.

In considering therapeutic non-verbal communication experiences these were categorized into those which dealt with personal functioning and interpersonal relations. TNVCE which have an emphasis on personal functioning fall into the general process of creativity. Creativity allows a person to take experience and information and make new associations which, when expressed and evaluated, may

become new modes of existing for the individual. The individual gains self-understanding.

TNVCE which deals with interpersonal relations have been categorized in relation to three basic interpersonal needs of man: the inclusion need, the control need, and the affection need. Each of these needs in turn centers around an ontological anxiety. The anxiety associated with inclusion is feelings of doubt about the worth of himself and a fear of being isolated by others. To be included gives one a sense of personal identity, of worth over against the other. The anxiety associated with the affection need is fear and doubt about self worth and fear that the self is basically unlovable. To have closeness and affection means to know self-acceptance. The anxiety associated with control needs is feelings of fear about his finitude and helplessness. To be autonomous, responsible for the self whether in taking the responsibility or giving the responsibility, means to have self-direction.

It was shown again that there is a correlation between the kerygma and the categories of therapeutic non-verbal communication experiences. The incarnation and TNVCE dealing with personal functioning bring self-understanding. Divine congruence and TNVCE dealing with inclusion-needs bring self-identity. Forgiveness and

TNVCE dealing with affection needs bring self-acceptance. God's grace and TNVCE dealing with control needs bring self-acceptance. And finally God's love and the total experience of being in a trusting, close group bring freedom to act on behalf of others.

A brief description of the TNVCE used in the experimental group at the Claremont Area Pastoral Counseling Center followed.

Conclusions

1. The author concludes that group therapy and TNVCE used in group therapy are analogous to the affirmations of the Christian kerygma. And although the analogy cannot be pushed too far at any point, it is strong enough to give a solid theological basis for group counseling and the use of TNVCE in group counseling.

2. Non-verbal communication comprises most of the communication which occurs within the therapeutic group. TNVCE give the group a chance to learn how to read the non-verbal messages which are constantly interrupted and disturbed.

3. Specific TNVCE which arise from the group life serve to illustrate and highlight basic truths in a language which is perceived in other-than-ordinary ways and gives each individual new information and experience with which to be creative.

4. TNVCE which arise out of the group need have deep therapeutic value. TNVCE which are imposed become games and lose much of their therapeutic value.

5. Maximum insight (new information and experience) is gained when individuals have a chance to express this to others. Follow-up discussions of TNVCE are essential. Further, the author found the "weekly report of the group session" filled out by each participant to have therapeutic value. One woman wrote: "I go through the whole damn thing all over again when I have to write this."

6. The therapeutic use of TNVCE takes great skill based upon correctly diagnosing the interaction between people and then leading them into the most appropriate experiences. Gaining the sensitivity to know when and how to use TNVCE is an important part of a therapist's growth.

BIBLIOGRAPHY

I. BOOKS

- Arndt, William F., and Gingrich, F. Wilbur. A Greek-English Lexicon of the New Testament, and Other Early Christian Literature, a Translation and Adaptation of Walter Bauer's Griechisch-Deutsches Worterbuch zu den Schriften des Neuen Testaments und der ubrigen urchristlichen Literature. Chicago: University of Chicago Press, 1957.
- Bach, George R. Intensive Group Psychotherapy. New York: Ronald Press, 1954.
- Barth, Karl. The Word of God and The Word of Man, Trans. Douglas Horton. New York: Harper Brothers, 1956.
- _____. Dogmatics in Outline. New York: Harper & Brothers, 1959.
- Bartsch, Hans Werner (ed.). Kerygma and Myth, A Theological Debate. New York: Harper & Row, 1961.
- Berne, Eric. Transactional Analysis in Psychotherapy, A Systematic Individual and Social Psychiatry. New York: Grove Press, 1961.
- Blees, Robert A. Counseling With Teen-Agers. Englewood Cliffs: Prentice-Hall, 1965.
- Bonhoeffer, Dietrich. Ethics. Edited by Eberhard Bethge, Trans. Neville Horton Smith. New York: Macmillan, 1955.
- Bradford, Leland P., Gibb, Jack R. and Beene, Kenneth D. (eds.). T-Group Theory and Laboratory Method, Innovation in Re-education. New York: Wiley, 1964.
- Bultmann, Rudolf. Jesus and the Word, Trans. Louise Pettibone Smith and Erminie Huntress Lantero. New York: Charles Scribner's Sons, 1934.
- Cadbury, Henry J. Jesus: What Manner of Man. New York: Macmillan, 1947.
- _____. The Making of Luke-Acts. London: S.P.C.K., 1958.
- Casteel, John L. (ed.). Spiritual Renewal Through Personal Groups. New York: Association Press, 1957.

- Cherry, Colin. On Human Communication, A Review, A Survey, and A Criticism. Cambridge: M.I.T. Press, 1957.
- Clinebell, Howard J., Jr. Basic Types of Pastoral Counseling, New Resources for Ministering to the Troubled. Nashville: Abingdon Press, 1966.
- _____. Mental Health Through Christian Community, The Local Church's Ministry of Growth and Healing. Nashville: Abingdon Press, 1965.
- Colwell, Ernest Cadman. An Approach to the Teaching of Jesus. New York: Abingdon-Cokesbury Press, 1947.
- Dibelius, Martin. Jesus. Trans. Charles B. Hedrick and Frederick C. Grant. Philadelphia: Westminster Press, 1949.
- Durkin, Helen E. The Group in Depth. New York: International Universities Press, 1964.
- Emerson, James G., Jr. The Dynamics of Forgiveness. Philadelphia: Westminster Press, 1964.
- Filson, Floyd V. Jesus Christ, The Risen Lord. Nashville: Abingdon Press, 1956.
- Frank, Jerome D. Persuasion and Healing. Baltimore: Johns Hopkins Press, 1961.
- Glasser, William. Reality Therapy, A New Approach to Psychiatry. New York: Harper & Row, 1965.
- Godin, Andre. The Pastor as Counselor. Trans. Bernard Phillips. New York: Rinehart and Winston, 1963.
- Gunther, Bernard. Sense Relaxation Below Your Mind. New York: Collier, 1968.
- Guntrip, Harry. Healing the Sick Mind. New York: Appleton-Century, 1964.
- Hiltner, Seward. Pastoral Counseling. New York: Abingdon-Cokesbury Press, 1949.
- Howe, Reuel L. The Miracle of Dialogue. New York: Seabury Press, 1963.
- Klapman, J. W. Group Psychotherapy, Theory and Practice. New York: Grune and Stratton, 1946.

- Klink, Thomas W. Depth Perspectives in Pastoral Work. Englewood Cliffs: Prentice-Hall, 1965.
- Knowles, Joseph W. Group Counseling. Englewood Cliffs: Prentice-Hall, 1964.
- Knox, John. Jesus, Lord and Christ. New York: Harper & Brothers, 1958.
- Leith, John H. (ed.). Creeds of the Churches, A Reader in Christian Doctrine from the Bible to the Present. Garden City, New York: Doubleday, 1963.
- Leonard, George B. Education and Ecstasy. New York: Delacorte Press, 1968.
- Leslie, Robert C. Jesus and Logotherapy, The Ministry of Jesus as Interpreted Through the Psychotherapy of Viktor Frankl. Nashville: Abingdon Press, 1965.
- McCasland, S. Vernon. By the Finger of God, Demon Possession and Exorcism in Early Christianity in Light of Modern Views of Mental Illness. New York: Macmillan, 1951.
- _____. The Pioneer of Our Faith, A New Life of Jesus. New York: McGraw-Hill, 1964.
- Mowrer, O. Hobart. The New Group Therapy. Princeton: Van Nostrand, 1964.
- Niebuhr, H. Richard, Williams, Daniel Day and Gustafson, James M. The Purposes of the Church and Its Ministry, Reflections on the Aims of Theological Education. New York: Harper & Row, 1956.
- Oden, Thomas C. Contemporary Theology and Psychotherapy. Philadelphia: Westminster Press, 1967.
- _____. Kerygma and Counseling, Toward a Covenant Ontology for Secular Psychotherapy. Philadelphia: Westminster Press, 1965.
- Perls, Frederick, Ralph E. Hefferline and Paul Goodman. Gestalt Therapy, Excitement and Growth in Human Personality. New York: Dell, 1951.
- Pinner, M., and Miller, B. F. (eds.). When Doctors are Patients. New York: Norton, 1952.

Rogers, Carl R. Counseling and Psychotherapy, Newer Concepts in Practice. Boston: Houghton Mifflin, 1942.

_____. On Becoming a Person. Boston: Houghton Mifflin, 1961.

Rosenbaum, Max, and Berger, Milton (eds.). Group Psychotherapy and Group Function. New York: Basic Books, 1963.

Ruesch, Jurgen, and Kees, Weldon. Non-Verbal Communication, Notes on the Visual Perception of Human Relations. Berkeley: University of California Press, 1966.

_____. and Bateson, Gregory. Communication, The Social Matrix of Psychiatry. New York: Norton, 1951.

_____. Therapeutic Communication. New York: Norton, 1961.

Satir, Virginia M. Cojoint Family Therapy, A Guide to Theory and Technique. Palo Alto: Science and Behavior Books, 1964.

Schutz, William C. Joy, Expanding Human Awareness. New York: Grove Press, 1967.

Storr, Anthony. The Integrity of the Personality. Baltimore: Penguin Books, 1960.

Taylor, Vincent. The Names of Jesus. New York: St. Martin's Press, 1953.

Tillich, Paul. Love, Power and Justice, Ontological Analyses and Ethical Applications. New York: Oxford University Press, 1954.

_____. Morality and Beyond. New York: Harper & Row, 1963.

_____. Courage to Be. New Haven: Yale University Press, 1952.

_____. The Shaking of the Foundations. New York: Charles Scribner's Sons, 1948.

Titus, Eric Lane. The Message of the Fourth Gospel. Nashville: Abingdon Press, 1957.

Wise, Carroll A. Pastoral Counseling, It's Theory and Practice. New York: Harper & Brothers, 1951.

II. ARTICLES, ETC.

Anderson, Camilla M. "Guilt Is Not the Problem," (Mimeographed) Pastoral Counselor (Fall 1964).

Ashbrook, James, B. "The Lost Dimension of the Physical: Some Preliminary Thoughts," Pastoral Psychology, XVII:161 (February 1966), 25-34.

Kimper, Frank W. "Self and Therapy." Claremont, California: School of Theology, 1968. (Mimeographed),

Knights, Ward A., Jr. "The Use of Self-Actualizing Group Therapy Techniques in Clinical Pastoral Training," Journal of Pastoral Care, XX:3 (September 1966), 163-165.

Leslie, Robert C. "The Uniqueness of Small Groups in the Church," Pastoral Psychology, XV (June 1964), 33-40.

Mitton, C. L. "Grace," Interpreter's Dictionary of the Bible, An Illustrated Encyclopedia. New York: Abingdon Press, 1962, II, 463.

Piper, O. A. "Gospel," The Interpreter's Dictionary of the Bible, An Illustrated Encyclopedia. New York: Abingdon Press, 1962, II, 318.

Quanbeck, W. A. "Forgiveness," Interpreter's Dictionary of the Bible, An Illustrated Encyclopedia. New York: Abingdon Press, 1962, II, 318.

Wise, Carroll A. "The Psychiatric Interview," Pastoral Psychology, V (November 1954), 57-60.

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